



# Anthem Blue Cross Cal MediConnect Plan (Medicare-Medicaid Plan) 2022 Listahan ng Mga Saklaw na Gamot (Pormularyo)

**PAKIBASA: ANG DOKUMENTONG ITO AY NAGLALAMAN NG IMPORMASYON  
TUNGKOL SA MGA GAMOT NA SINASAKLAW NAMIN SA PLANONG ITO.**

Na-update ang pormularyong ito noong 11/2/2022.

Para sa mas bagong impormasyon o iba pang tanong, makipag-ugnayan sa amin sa  
**1-833-370-7466 (TTY: 711)**  
**24 na oras sa isang araw, 7 araw sa isang linggo**  
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# Anthem Blue Cross Cal MediConnect Plan (Medicare-Medicaid Plan)

## Listahan ng Mga Saklaw na Gamot (Formulary) para sa 2022

### Panimula

Ang dokumentong ito ay tinatawag na *Listahan ng Mga Saklaw na Gamot* (kilala rin bilang Listahan ng Gamot). Ipinapaalam nito sa inyo kung aling mga inireresetang gamot at over-the-counter na gamot at bagay ang saklaw ng Anthem Blue Cross Cal MediConnect Plan. Ipinapaalam din sa inyo ng Listahan ng Gamot kung may anumang espesyal na panuntunan o paghihigpit sa anumang gamot na saklaw ng Anthem Blue Cross Cal MediConnect Plan. Makikita ang mga pangunahing termino at kahulugan ng mga ito sa huling kabanata ng *Handbook ng Miyembro*.

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## A. Mga Disclaimer

Isa itong listahan ng mga gamot na maaaring makuha ng mga miyembro sa Anthem Blue Cross Cal MediConnect Plan.

- ❖ Ang Anthem Blue Cross Cal MediConnect Plan (Medicare-Medicaid Plan) ay isang planong pangkalusugang nakikipagkontrata sa Medicare at Medi-Cal upang ibigay ang mga benepisyo ng parehong programa sa mga nagpapatala.
- ❖ Maaari ninyong tingnan online ang updated na Listahan ng Mga Saklaw na Gamot ng Anthem Blue Cross Cal MediConnect Plan anumang oras sa [duals.anthem.com](http://duals.anthem.com) o sa pamamagitan ng pagtawag sa **1-833-370-7466 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo**
- ❖ Maaaring may malapat na mga limitasyon, copay, at paghihigpit. Para sa higit pang impormasyon, tawagan ang Mga Serbisyo sa Miyembro ng Parmasya ng Anthem Blue Cross Cal MediConnect Plan o basahin ang *Handbook ng Miyembro* ng Anthem Blue Cross Cal MediConnect Plan.

注意：如果您使用中文，您可以免費獲得語言援助服務。請致電**1-833-370-7466** (TTY:711)，一週7天，全天24小時。通話免費。

Chinese

ATENCIÓN: Si usted habla español, tiene a su disposición servicios gratuitos de asistencia de idiomas. Llame al **1-833-370-7466** (TTY: 711), las 24 horas del día, los 7 días de la semana. La llamada es gratuita.

Spanish

PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo nang walang bayad ang mga serbisyo ng tulong sa wika. Tumawag sa **1-833-370-7466** (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo. Libre ang tawag.

Tagalog

CHÚ Ý: Nếu quý vị nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ, miễn phí, cho quý vị. Xin gọi số **1-833-370-7466** (TTY: 711), 24 giờ mỗi ngày, 7 ngày mỗi tuần. Cuộc gọi được miễn tính cước phí.

Vietnamese

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- Kapag tumawag, ipaalam sa amin kung gusto ba ninyong maging standing order ito. Ang ibig sabihin nito ay ipapadala namin ang parehong mga dokumento sa inyong hiniling na format at wika bawat taon.
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Kung may mga tanong kayo, pakitawagan ang Anthem Blue Cross Cal MediConnect Plan sa **1-833-370-7466 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo**. Libre ang tawag. Para sa higit pang impormasyon, bisitahin ang [duals.anthem.com](http://duals.anthem.com).

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## B. Mga Madalas Itanong (FAQ)

Makahanap dito ng mga sagot sa mga naiisip ninyong tanong tungkol sa *Listahan ng Mga Saklaw na Gamot* na ito. Maaari ninyong basahin ang lahat ng FAQ upang matuto pa, o maaari kayong maghanap ng tanong at sagot.

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### B1. Anong mga inireresetang gamot ang nasa *Listahan ng Mga Saklaw na Gamot*?

(Tinatawag namin ang *Listahan ng Mga Saklaw na Gamot* na “Listahan ng Gamot” para maikli.)

Ang mga gamot na nasa Listahan ng Gamot ay ang mga gamot na saklaw ng Anthem Blue Cross Cal MediConnect Plan. Available ang mga gamot sa mga botikang nasa aming network. Nasa aming network ang isang botika kung mayroon kaming kasunduan sa kanilang makipagtulungan sa amin at magbigay sa inyo ng mga serbisyo. Tinutukoy namin ang mga botikang ito bilang “mga botikang nasa network.”

- Sasaklawin ng Anthem Blue Cross Cal MediConnect Plan ang lahat ng gamot na kinakailangan sa pagpapagamot na nasa Listahan ng Gamot kung:
  - sabihin ng inyong doktor o iba pang tagapagreseta na kailangan ninyo ang mga ito upang gumaling o manatiling malusog, **at**
  - kukunin ninyo ang inireresetang gamot sa isang botikang nasa network ng Anthem Blue Cross Cal MediConnect Plan.
- Sa ilang sitwasyon, may kailangan kayong gawin bago kayo makakuha ng gamot (sumangguni sa B4 sa ibaba).

Makakakita rin kayo ng updated na listahan ng mga gamot na sinasaklaw namin sa aming website sa **duals.anthem.com** o tumawag sa Mga Serbisyo sa Miyembro ng Parmasya sa **1-833-370-7466 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo.**



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Kung may mga tanong kayo, pakitawagan ang **Anthem Blue Cross Cal MediConnect Plan** sa **1-833-370-7466 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo.** Libre ang tawag. Para sa higit pang impormasyon, bisitahin ang **duals.anthem.com**.

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## B2. Nagbabago ba ang Listahan ng Gamot?

Oo, at dapat sundin ng Anthem Blue Cross Cal MediConnect Plan ang mga patakaran ng Medicare at Medicaid kapag nagsasagawa ng mga pagbabago. Maaari kaming magdagdag o mag-alis ng mga gamot sa Listahan ng Gamot sa kasagsagan ng taon.

Maaari din naming baguhin ang aming mga panuntunan tungkol sa mga gamot. Halimbawa, magagawa naming:

- Magpasyang humingi o hindi humingi ng paunang pag-apruba para sa isang gamot. (Ang *paunang pag-apruba* ay pahintulot mula sa Anthem Blue Cross Cal MediConnect Plan bago kayo makakuha ng gamot.)
- Dagdagan o baguhin ang dami ng isang gamot na makukuha ninyo (tinatawag na mga limitasyon sa dami).
- Dagdagan o baguhin ang mga paghihigpit sa step therapy sa isang gamot. (Ang *step therapy* ay nangangahulugang dapat ninyong subukan ang isang gamot bago namin saklawin ang isa pang gamot.)

Para sa higit pang impormasyon sa mga panuntunan sa gamot na ito, sumangguni sa tanong B4.

Kung gumagamit kayo ng gamot na sinasaklaw sa **simula** ng taon, karaniwan ay hindi namin aalisin o babaguhin ang saklaw ng gamot na iyon **sa natitirang bahagi ng taon** maliban kung:

- magkakaroon ng bago at mas murang gamot sa merkado na kasimbisa ng gamot na nasa Listahan ng Gamot ngayon, o
- mapag-alaman naming hindi ligtas ang isang gamot, o
- alisin ang isang gamot sa merkado.

Mayroong higit pang impormasyon sa tanong B3 at B6 sa ibaba tungkol sa kung ano ang mangyayari kapag nagbago ang Listahan ng Gamot.

- Maaari ninyong tingnan online ang updated na Listahan ng Gamot ng Anthem Blue Cross Cal MediConnect Plan anumang oras sa **duals.anthem.com**.
- Maaari din ninyong tawagan ang Mga Serbisyo sa Miyembro ng Parmasya upang tingnan ang kasalukuyang Listahan ng Gamot sa **1-833-370-7466 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo**.



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### B3. Ano ang mangyayari kapag may pagbabago sa Listahan ng Gamot?

Ang ilang pagbabago sa Listahan ng Gamot ay mangyayari **kaagad**. Bilang halimbawa:

- **Magkakaroon ng bagong generic na gamot.** Kung minsan, magkakaroon ng bagong generic na gamot sa merkado na kasimbisa ng branded na gamot na nasa Listahan ng Gamot ngayon. Kapag nangyari iyon, maaari naming alisin ang branded na gamot at idagdag ang bagong generic na gamot, ngunit hindi magbabago ang inyong gastos para sa bagong gamot. Kapag nagdagdag kami ng bagong generic na gamot, maaari din kaming magdesisyong panatilihin ang branded na gamot sa listahan ngunit babaguhin namin ang mga panuntunan o limitasyon nito sa saklaw.
  - Maaaring hindi namin sabihin sa inyo bago namin isagawa ang pagbabagong ito, ngunit mapapadala kami sa inyo ng impormasyon tungkol sa partikular na pagbabagong isinagawa namin kapag nangyari ito.
  - Kayo o ang inyong tagapagbigay ng serbisyo ay maaaring humiling ng pagbubukod mula sa mga pagbabagong ito. Papadalhan namin kayo ng abiso kasama ng mga hakbang na maaari ninyong gawin upang humiling ng pagbubukod. Maaaring sumangguni sa tanong B10 para sa higit pang impormasyon sa mga pagbubukod.
- **May inalis na gamot sa merkado.** Kung sasabihin ng Food and Drug Administration (FDA) na ang ginagamit ninyong gamot ay hindi ligtas o kung ang gamot ay aalisin ng gumawa ng gamot sa merkado, aalisin namin ito sa Listahan ng Gamot. Kung ginagamit ninyo ang gamot, ipapaalam namin ito sa inyo. Maaaring makipag-ugnayan sa inyong tagapagresetang doktor sa lalong madaling panahong makuha ninyo ang liham.

**Maaari kaming gumawa ng iba pang pagbabago na makakaapekto sa mga gamot na ginagamit ninyo.** Sasabihin namin sa inyo nang mas maaga ang tungkol sa iba pang pagbabagong ito sa Listahan ng Gamot. Maaaring mangyari ang mga pagbabagong ito kung:

- Magbibigay ang FDA ng bagong patnubay o mga bagong klinikal na patnubay tungkol sa gamot.
- Magdadagdag kami ng generic na gamot na hindi bago sa merkado **at**
  - Mapapalitan ang branded na gamot na kasalukuyang nasa Listahan ng Gamot **o**
  - Mababago ang mga panuntunan o limitasyon ng saklaw para sa branded na gamot.

Kapag nangyari ang mga pagbabagong ito, gagawin namin ang sumusunod:

- Ipaalam ito sa inyo sa loob ng hindi bababa sa 30 araw bago namin isagawa ang pagbabago sa Listahan ng Gamot **o**
- Ipaalam ito sa inyo at bigyan kayo ng 31 araw na supply ng gamot pagkatapos ninyong magpa-refill.

Mabibigyan kayo nito ng panahong kausapin ang inyong doktor o iba pang tagapagresetaya. Matutulungan niya kayong magdesisyon:



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Kung may mga tanong kayo, pakitawagan ang **Anthem Blue Cross Cal MediConnect Plan** sa **1-833-370-7466 (TTY: 711)**, **24 na oras sa isang araw, 7 araw sa isang linggo**. Libre ang tawag. Para sa higit pang impormasyon, bisitahin ang **duals.anthem.com**.

- Kung may ibang kaparehong gamot sa Listahan ng Gamot na maaari ninyong inumin o
  - Kung dapat ba kayong humiling ng pagbubukod sa mga pagbabagong ito. Para matuto pa tungkol sa mga pagbubukod, sumangguni sa tanong B10.
- 

#### **B4. Mayroon bang anumang paghihigpit o limitasyon sa saklaw sa gamot o anumang kinakailangang gawing pagkilos upang makakuha ng ilang partikular na gamot?**

Oo, may ilang gamot na may mga panuntunan sa saklaw o may mga limitasyon sa dami ng maaari ninyong kunin. Sa ilang sitwasyon, kayo o ang inyong doktor o iba pang tagapagreseta ay may dapat gawin bago ninyo makakuha ang gamot. Bilang halimbawa:

- **Paunang pag-apruba (o paunang pahintulot):** Para sa ilang gamot, dapat kumuha kayo o ang inyong doktor o iba pang tagapagreseta ng pag-apruba mula sa Anthem Blue Cross Cal MediConnect Plan bago ninyo kunin ang inyong mga inireresetang gamot. Maaaring hindi saklawin ng Anthem Blue Cross Cal MediConnect Plan ang gamot kung hindi kayo makakakuha ng pag-apruba.
- **Mga limitasyon sa dami:** Kung minsan, nililimitahan ng Anthem Blue Cross Cal MediConnect Plan ang dami ng gamot na maaari ninyong kunin.
- **Step therapy:** Kung minsan, hihingin sa inyo ng Anthem Blue Cross Cal MediConnect Plan na gawin ang step therapy. Nangangahulugan itong kakailanganin ninyong sumubok ng mga gamot sa isang partikular na pagkakasunod-sunod para sa inyong medikal na kondisyon. Maaaring kailanganin ninyong subukan ang isang gamot bago namin saklawin ang isa pang gamot. Kung sa palagay ng inyong doktor ay hindi mabisa sa inyo ang unang gamot, sasaklawin namin ang pangalawa.

Maaari ninyong alamin kung may anumang karagdagang kinakailangan o limitasyon ang inyong gamot sa pamamagitan ng pagtingin sa mga talahanayan sa pahina 15 - 131. Maaari din kayong makakuha ng higit pang impormasyon sa pamamagitan ng pagbisita sa aming website sa **duals.anthem.com**. Nag-post kami ng mga online na dokumentong nagpapaliwanag ng aming mga paghihigpit sa paunang pahintulot at step therapy. Maaari din ninyong hilingin sa aming padalhan kayo ng kopya.

Maaari kayong humiling ng pagbubukod mula sa mga limitasyong ito. Mabibigyan kayo nito ng panahong kausapin ang inyong doktor o iba pang tagapagreseta. Matutulungan niya kayong magdesisyon kung may katulad na gamot sa Listahan ng Gamot na maaari ninyong gamitin, o kung gusto ninyong humiling ng pagbubukod. Mangyaring sumangguni sa mga tanong B10- B12 para sa higit pang impormasyon tungkol sa mga pagbubukod.



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**B5. Paano ko malalaman kung ang gusto kong gamot ay may mga limitasyon o kung may mga kinakailangang gawing pagkilos upang makuha ang gamot?**

Ang talahanayan ng mga gamot sa pahina 15 ay may column na may label na “Mga kinakailangang pagkilos, paghihigpit, o limitasyon sa paggamit.”

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**B6. Ano ang mangyayari kung babaguhin ng Anthem Blue Cross Cal MediConnect Plan ang kanilang mga panuntunan tungkol sa ilang gamot (halimbawa, mga paghihigpit sa paunang pahintulot (pag-apruba), mga limitasyon sa dami, at/o step therapy.**

Sa ilang sitwasyon, sasabihin namin sa inyo nang mas maaga kung daragdagan o babaguhin namin ang mga paghihigpit sa paunang pag-apruba, mga limitasyon sa dami, at/o step therapy sa isang gamot. Sumangguni sa tanong B3 para sa higit pang impormasyon tungkol sa paunang abisong ito at sa mga sitwasyon kung saan maaaring hindi namin masabi nang mas maaga sa inyo kapag nagbago ang aming mga panuntunan tungkol sa mga gamot na nasa Listahan ng Gamot.

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**B7. Paano ko mahahanap ang isang gamot sa Listahan ng Gamot?**

May dalawang paraan upang mahanan ang isang gamot:

- Maaari kayong maghanap ayon sa alpabetikong ayos ng pangalan ng gamot, o
- Maaari kayong maghanap ayon sa medikal na kundisyon.

Para maghanap ayon sa pagkakasunod-sunod sa **alpabeto**, sumangguni sa seksyon ng Index ng Mga Saklaw na Gamot. Makikita ninyo ito sa pamamagitan ng pagpunta sa listahang nagsisimula sa pahina 132, pagkatapos ay paghahanap ng inyong gamot sa listahan.

Upang maghanap **ayon sa medikal na kundisyon**, hanapin ang seksyong may label na “Mga Gamot na Ipinangkat ayon sa Medikal na Kundisyon” sa pahina 15. Ang mga gamot na nasa seksyong ito ay nakagrupo sa mga kategorya batay sa uri ng mga medikal na kundisyon ginagamot ng mga ito. Halimbawa, kung mayroon kayong kundisyon sa puso, dapat kayong tumingin sa kategoryang Mga Cardiovascular Agent. Doon ninyo mahahanap ang mga gamot na nagbibigay-lunas sa mga kundisyon sa puso.



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## B8. Paano kung ang gamot na gusto kong gamitin ay wala sa Listahan ng Gamot?

Kung hindi ninyo mahanap ang inyong gamot sa Listahan ng Gamot, tawagan ang Mga Serbisyo sa Miyembro ng Parmasya sa **1-833-370-7466** (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo at tanunin ang tungkol dito. Kung mapag-alaman ninyong hindi sasaklawin ng Anthem Blue Cross Cal MediConnect Plan ang gamot, maaari ninyong gawin ang isa sa mga bagay na ito:

- Humingi sa Mga Serbisyo sa Miyembro ng Parmasya ng listahan ng mga gamot na katulad ng gamot na gusto ninyong gamitin. Pagkatapos ay ipakita ang listahan sa inyong doktor o iba pang tagapagreseta. Maaari siyang magreseta ng gamot na nasa Listahan ng Gamot na katulad ng gamot na gusto ninyong gamitin. **O**
- Maaari ninyong hilingin sa planong pangkalusugan na gumawa ng pagbubukod upang saklawin ang inyong gamot. Mangyaring sumangguni sa mga tanong B10 - B12 para sa higit pang impormasyon tungkol sa mga pagbubukod.



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**B9. Paano kung isa akong bagong miyembro ng Anthem Blue Cross Cal MediConnect Plan at hindi ko mahanap ang aking gamot sa Listahan ng Gamot o mayroon akong problema sa pagkuha ng aking gamot?**

Maaari kaming makatulong. Maaari naming saklawin ang isang pansamantalang 31 araw na supply ng inyong gamot sa unang 90 araw na kayo ay miyembro ng Anthem Blue Cross Cal MediConnect Plan. Mabibigyan kayo nito ng panahong kausapin ang inyong doktor o iba pang tagapagreseta. Matutulungan niya kayong magdesisyon kung may katulad na gamot sa Listahan ng Gamot na maaari ninyong gamitin, o kung gusto ninyong humiling ng pagbubukod.

Kung ang inireseta sa inyo ay para sa mas kaunting bilang ng araw, papayagan namin ang maraming pag-refill upang magbigay ng hanggang sa maximum na 31 araw ng gamot.

Sasaklawin namin ang 31 araw na supply ng inyong gamot kung:

- gumagamit kayo ng gamot na wala sa aming Listahan ng Gamot, o
- hindi nagbibigay-daan sa inyo ang planong pangkalusugan na makuha ang dami na inorder ng inyong tagapagreseta, o
- kinakailangan para sa gamot ang paunang pag-aprubra ng Anthem Blue Cross Cal MediConnect Plan, o
- gumagamit kayo ng gamot na bahagi ng paghihigpit sa step therapy.

Kung kayo ay nasa isang nursing home o ibang pasilidad ng pangmatagalang pangangalaga at nangangailangan ng gamot na wala sa aming Listahan ng Gamot o kung hindi ninyo makuha ang kailangan ninyong gamot sa madaling paraan, maaari kaming tumulong. Kung kayo ay mahigit 90 araw nang miyembro ng plano, nakatira sa isang pasilidad ng pangmatagalang pangangalaga, at nangangailangan kaagad ng supply:

- Sasaklawin namin ang isang 34 araw na supply ng gamot na kailangan ninyo (maliban kung may inireseta sa inyo para sa mas kaunting bilang ng araw), bagong miyembro man kayo ng Anthem Blue Cross Cal MediConnect Plan o hindi.
- Bukod pa ito sa pansamantalang supply sa loob ng unang 90 araw na kayo ay miyembro ng Anthem Blue Cross Cal MediConnect Plan.

Kung makaranas kayo ng pagbabago sa antas ng pangangalagang natatanggap ninyo kung saan kakailanganin ninyong lumipat ng pasilidad o sentro ng paggamot, maaari kayong maging kwalipikado para sa isang beses na pansamantalang pagkuha ng inireresetang gamot na mayroon kayo ngayon. Halimbawa, kung kayo ay lumabas na ng ospital at binigyan ng listahan ng mga gamot sa paglabas ng ospital batay sa formularyo ng ospital, maaari kayong magkaroon ng isang beses na pagkuha ng gamot. Maaari ninyong makuha ang pagbubukod na pansamantalang isang beses na pagkuha, nasa unang 90 araw man kayo ng pagpapatala sa programa o hindi. Patawagin sa amin ang inyong tagapagreseta para sa mga detalye.



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## **B10. Maaari ba akong humiling ng pagbubukod upang saklawin ang aking gamot?**

Oo. Maaari ninyong hilingin sa Anthem Blue Cross Cal MediConnect Plan na gumawa ng pagbubukod upang saklawin ang isang gamot na wala sa Listahan ng Gamot.

Maaari din ninyong hilingin sa aming baguhin ang mga panuntunan sa inyong gamot.

- Halimbawa, maaaring limitahan ng Anthem Blue Cross Cal MediConnect Plan ang dami ng gamot na sasaklawin namin. Kung may limitasyon ang inyong gamot, maaari ninyong hilingin sa aming baguhin ang limitasyon at saklawin ang higit pa.
  - Iba pang halimbawa: Maaari ninyong hilingin sa aming alisin ang mga paghihigpit sa step therapy o kinakailangan sa paunang pag-apruba.
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## **B11. Paano ako makakahiling ng pagbubukod?**

Upang humiling ng pagbubukod, tawagan ang Mga Serbisyo sa Miyembro ng Parmasya. Makikipagtulungan sa inyo o sa inyong tagapagbigay ng serbisyo ang inyong kinatawan ng Mga Serbisyo sa Miyembro ng Parmasya upang tulungan kayong humiling ng pagbubukod.

Maaari din ninyong basahin ang Kabanata 9 ng *Handbook ng Miyembro* upang matuto pa tungkol sa mga pagbubukod.

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## **B12. Gaano katagal ang aabutin bago makakuha ng pagbubukod?**

Pagkatapos naming makakuha ng pahayag mula sa tagareseta ninyo na sumusuporta sa kahilingan ninyo para sa isang pagbubukod, bibigyan namin kayo ng desisyon sa loob ng 72 oras. Puwedeng ipadala ang pahayag sa:

Anthem Blue Cross Cal MediConnect Plan  
Attn: Pharmacy Department  
P O Box 47686  
San Antonio, TX 78265-8686  
FAX: 1-844-493-9213

Kung sa palagay ninyo o ng inyong tagapagreseta ay maaaring makasama sa inyong kalusugan kung kakailanganin ninyong maghintay nang 72 oras para sa isang desisyon, maaari kayong humiling ng pinabilis na pagbubukod. Isa itong mas mabilis na desisyon. Kung susuportahan ng inyong tagapagreseta ang inyong kahilingan, bibigyan namin kayo ng desisyon sa loob ng 24 na oras pagkatapos makuha ang sumusuportang pahayag ng inyong tagapagreseta.



**Kung may mga tanong kayo, pakitawagan ang Anthem Blue Cross Cal MediConnect Plan sa 1-833-370-7466 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo. Libre ang tawag. Para sa higit pang impormasyon, bisitahin ang [duals.anthem.com](http://duals.anthem.com).**

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### **B13. Ano ang mga generic na gamot?**

Ang mga generic na gamot ay binubuo ng mga sangkap na pareho sa mga branded na gamot. Kadalasan ay mas mura ang mga ito kumpara sa branded na gamot at hindi gaanong kilala ang mga pangalan ng mga ito. Ang mga generic na gamot ay inaprubahan ng Food and Drug Administration (FDA).

Sinasaklaw ng Anthem Blue Cross Cal MediConnect Plan ang mga branded na gamot at generic na gamot.

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### **B14. Ano ang mga OTC na gamot?**

Ang ibig sabihin ng OTC ay “over-the-counter.” Sinasaklaw ng Anthem Blue Cross Cal MediConnect Plan ang ilang OTC na gamot kapag isinulat ang mga ito bilang mga reseta ng inyong tagapagbigay ng serbisyo.

Maaari ninyong basahin ang Listahan ng Gamot ng Anthem Blue Cross Cal MediConnect Plan upang malaman kung anong mga OTC na gamot ang saklaw.

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### **B15. Sinasaklaw ba ng Anthem Blue Cross Cal MediConnect Plan ang mga OTC na produktong hindi gamot?**

Sinasaklaw ng Anthem Blue Cross Cal MediConnect Plan ang ilang OTC na produktong hindi gamot kapag isinulat ang mga ito bilang mga reseta ng inyong tagapagbigay ng serbisyo.

Kabilang sa mga halimbawa ng mga OTC na produktong hindi gamot ang mga mask, condom, at peak air flow meter.

Maaari ninyong basahin ang Listahan ng Gamot ng Anthem Blue Cross Cal MediConnect Plan upang malaman kung anong mga OTC na produktong hindi gamot ang saklaw.

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### **B16. Ano ang aking copay?**

Maaari ninyong basahin ang Listahan ng Gamot ng Anthem Blue Cross Cal MediConnect Plan upang malaman ang tungkol sa copay para sa bawat gamot. Walang copay ang mga miyembro ng Anthem Blue Cross Cal MediConnect Plan na nakatira sa mga nursing home o iba pang pasilidad ng pangmatagalang pangangalaga. Wala rin copay ang ilang miyembrong nakakatanggap ng pangmatagalang pangangalaga sa komunidad.

Ang mga copay ay nakalista ayon sa mga baitang. Ang mga baitang ay mga grupo ng mga gamot na may parehong copay.

- Baitang 1 – Mga generic at branded na gamot na pinili ng Medicare Part D.  
Ang copay ay \$0.
- Baitang 2 – Mga generic at branded na gamot na pinili at hindi pinili ng Medicare Part D.  
Ang copay ay mula \$0 hanggang \$9.85, depende sa inyong kita.



Kung may mga tanong kayo, pakitawagan ang **Anthem Blue Cross Cal MediConnect Plan** sa **1-833-370-7466 (TTY: 711)**, 24 na oras sa isang araw, 7 araw sa isang linggo. Libre ang tawag. Para sa higit pang impormasyon, bisitahin ang **duals.anthem.com**.

- Baitang 3 – Mga generic at branded na gamot na hindi Medicare at inaprubahan ng estado sa Medi-Cal.  
Ang copay ay \$0.
- Baitang 4 – Mga over-the-counter (OTC) na gamot na hindi Medicare at inaprubahan ng estado sa Medi-Cal na nangangailangan ng reseta mula sa inyong tagapagbigay ng serbisyo.  
Ang copay ay \$0.



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Kung may mga tanong kayo, pakitawagan ang **Anthem Blue Cross Cal MediConnect Plan** sa **1-833-370-7466 (TTY: 711)**, 24 na oras sa isang araw, 7 araw sa isang linggo. Libre ang tawag. Para sa higit pang impormasyon, bisitahin ang **duals.anthem.com**.

## C. Pangkalahatang-ideya sa Listahan ng Mga Saklaw na Gamot

Ang sumusunod na listahan ng mga saklaw na gamot ay nagbibigay sa inyo ng impormasyon tungkol sa mga gamot na saklaw ng Anthem Blue Cross Cal MediConnect Plan. Kung may problema kayo sa paghahanap ng inyong gamot sa listahan, pumunta sa Index ng Mga Saklaw na Gamot na nagsisimula sa pahina 132. Nakalista sa Index ang lahat ng gamot na saklaw ng Anthem Blue Cross Cal MediConnect Plan ayon sa alpabetikong ayos.

Nakalista sa unang column ng chart ang pangalan ng gamot. Nakasulat sa malalaking titik ang mga branded na gamot (hal., SPIRIVA RESPIMAT) at nakalista ang mga generic na gamot sa maliliit na titik na nakasulat nang palihis (hal., atenolol).

Ipinapaalam sa inyo ng impormasyong nasa column na “Mga kinakailangang pagkilos, paghihigpit, o limitasyon sa paggamit” kung may anumang panuntunan ang Anthem Blue Cross Cal MediConnect Plan para sa pagsaklaw ng inyong gamot.

**Tandaan:** Ang asterisk (\*) sa tabi ng isang gamot ay nangangahulugang hindi isang “Part D na gamot” ang gamot. Hindi ninyo kakailanganing magbayad ng copay para sa mga gamot na ito. Ang mga gamot na ito ay mayroon ding magkakaibang panuntunan para sa mga apela.

- Ang *apela* ay isang pormal na paraan ng paghiling sa aming suriin ang isang desisyong ginawa namin tungkol sa inyong pagsaklaw at baguhin ito kung sa tingin ninyo ay nagkamali kami. Halimbawa, maaari kaming magdesisyong ang isang gamot na gusto ninyo ay hindi saklaw o hindi na saklaw ng Medicare o Medi-Cal.
- Kung kayo o ang inyong doktor ay hindi sang-ayon sa aming desisyon, maaari kayong mag-apela. Kung sakaling may tanong kayo, tawagan ang Mga Serbisyo sa Miyembro ng Parmasya sa **1-833-370-7466 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo**. Maaari din ninyong basahin ang Kabanata 9 ng *Handbook ng Miyembro* upang matutunan kung paano umapela ng desisyon.



## C1. Mga Gamot na Ipinangkat ayon sa Medikal na Kundisyon

Ang mga gamot na nasa seksyong ito ay nakagrupo sa mga kategorya batay sa uri ng mga medikal na kundisyong ginagamot ng mga ito. Halimbawa, kung mayroon kayong kundisyon sa puso, dapat kayong tumingin sa kategoryang Mga Cardiovascular Agent. Doon ninyo mahahanap ang mga gamot na nagbibigay-lunas sa mga kundisyon sa puso.

**Narito ang mga kahulugan ng mga code na ginamit sa column na “Mga kinakailangang pagkilos, paghihigpit, o limitasyon sa paggamit”:**

ABBREVIATION	PAGLALARAWAN	PALIWANAG
B/D PA	Part B vs. Part D na pagpapasya	Maaaring saklawin ang inireresetang gamot na ito sa ilalim ng Medicare Part B o D depende sa mga sitwasyon. Maaaring kailangang magsumite ng impormasyong naglalarawan ng paggamit at pagtatakda ng gamot upang magawa ang pagpapasya.
LA	Limitadong Access	Maaaring available lang ang inireresetang gamot na ito sa ilang partikular na botika. Para sa higit pang impormasyon, pakitawagan ang Mga Serbisyo sa Miyembro ng Parmasya sa <b>1-833-370-7466 (TTY: 711)</b> , <b>24 na oras sa isang araw, 7 araw sa isang linggo</b> .
MO	Mail-Order na Gamot	Available ang inireresetang gamot na ito sa pamamagitan ng aming serbisyo na pag-order sa pamamagitan ng koreo, gayundin sa pamamagitan ng aming mga retail na botikang nasa network. Pag-isipang gumamit ng pag-order sa pamamagitan ng koreo para sa inyong mga pangmatagalanan (maintenance) na gamot (gaya ng mga gamot sa altapresyon). Maaaring mas naaangkop ang mga retail na botikang nasa network para sa mga pangmaikling panahong reseta (gaya ng mga antibiotic).
NEDS	Nonextended	Kabilang sa mga nonextended na pang-araw na supply ng mga gamot ang mga specialty na gamot. Kumukuha ng mga specialty na gamot para sa 31 araw na supply.
PA	Kinakailangan ng Paunang Pahintulot (Prior Authorization Required)	Hinihingi ng Anthem Blue Cross Cal MediConnect Plan sa inyo o sa inyong doktor na kumuha ng paunang pahintulot para sa ilang partikular na gamot. Nangangahulugan itong kakailanganin ninyong kumuha ng pag-apruba bago ninyo makuha ang inyong mga inireresetang gamot. Kung hindi kayo kukuha ng pag-apruba, maaaring hindi namin saklawin ang gamot.
QL	Limitasyon sa Dami (Quantity Limit)	Para sa ilang partikular na gamot, nililimitahan ng Anthem Blue Cross Cal MediConnect Plan ang dami ng gamot na sasaklawin namin.
ST	Step Therapy.	Sa ilang sitwasyon, hihingin sa inyo ng Anthem Blue Cross Cal MediConnect Plan na subukan muna ang ilang partikular na gamot upang magbigay-lunas sa inyong medikal na kundisyon bago namin saklawin ang isa pang gamot para sa kundisyon ito. Halimbawa, kung ang Gamot A at Gamot B ay parehong nakakapagbigay-lunas sa inyong medikal na kundisyon, maaaring hindi namin saklawin ang Gamot B maliban kung susubukan muna ninyo ang Gamot A. Kung hindi maging mabisa sa inyo ang Gamot A, at saka namin sasaklawin ang Gamot B.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<b>ANALGESICS</b>		
<i>acetaminophen 325 mg tab</i>	Tier 4	[*]
<i>acetaminophen extra strength 500 mg tab</i>	Tier 4	[*]
<i>acetaminophen-codeine #2</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>acetaminophen-codeine #3</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>acetaminophen-codeine #4</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>acetaminophen-codeine 120-12 mg/5ml solution</i>	Tier 2	QL (900 per 30 days); MO; NEDS
<i>acetaminophen-codeine 300-15 mg tab, 300-30 mg tab, 300-60 mg tab</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>adult aspirin regimen 81 mg tab dr</i>	Tier 4	[*]
<i>ADVIL 200 MG TAB</i>	Tier 4	[*]
<i>all day pain relief 220 mg tab</i>	Tier 4	[*]
<i>all day relief 220 mg tab</i>	Tier 4	[*]
<i>aphen 325 mg tab</i>	Tier 4	[*]
<i>aspirin 81 mg chew tab, 81 mg tab dr, 300 mg suppos, 325 mg tab, 325 mg tab dr, 600 mg suppos</i>	Tier 4	[*]
<i>aspirin adult low dose 81 mg tab dr</i>	Tier 4	[*]
<i>aspirin adult low strength 81 mg tab dr</i>	Tier 4	[*]
<i>aspirin ec 325 mg tab dr</i>	Tier 4	[*]
<i>aspirin low dose 81 mg chew tab, 81 mg tab dr</i>	Tier 4	[*]
<i>butorphanol tartrate 1 mg/ml solution</i>	Tier 2	QL (240 per 30 days); MO; NEDS
<i>butorphanol tartrate 10 mg/ml solution</i>	Tier 2	QL (5 per 30 days); MO; NEDS
<i>butorphanol tartrate 2 mg/ml solution</i>	Tier 2	QL (120 per 30 days); MO; NEDS
<i>celecoxib</i>	Tier 2	MO
<i>childrens aspirin 81 mg chew tab</i>	Tier 4	[*]
<i>diclofenac potassium 50 mg tab</i>	Tier 2	MO
<i>diclofenac sodium 1 % gel</i>	Tier 2	QL (1000 per 30 days); MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>diclofenac sodium 1 % gel</i>	Tier 4	[*]
<i>diclofenac sodium 25 mg tab dr, 50 mg tab dr, 75 mg tab dr</i>	Tier 2	MO
<i>diclofenac sodium er</i>	Tier 2	MO
<i>diflunisal</i>	Tier 2	MO
<i>duramorph</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>ec-naproxen</i>	Tier 2	MO
<i>endocet</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>eq pain reliever 325 mg tab</i>	Tier 4	[*]
<i>etodolac</i>	Tier 2	MO
<i>fenoprofen calcium 600 mg tab</i>	Tier 2	MO
<i>fentanyl 12 mcg/hr patch 72hr, 25 mcg/hr patch 72hr, 50 mcg/hr patch 72hr, 75 mcg/hr patch 72hr, 100 mcg/hr patch 72hr</i>	Tier 2	PA; QL (15 per 30 days); MO; NEDS
<i>fentanyl citrate 200 mcg loz handle, 400 mcg loz handle, 600 mcg loz handle, 800 mcg loz handle, 1200 mcg loz handle, 1600 mcg loz handle</i>	Tier 2	PA; QL (120 per 30 days); MO; NEDS
<i>flurbiprofen</i>	Tier 2	MO
<i>gnp acetaminophen 325 mg tab</i>	Tier 4	[*]
<i>gnp adult aspirin low strength 81 mg chew tab</i>	Tier 4	[*]
<i>gnp arthritis pain 1 % gel</i>	Tier 4	[*]
<i>gnp aspirin 325 mg tab, 325 mg tab dr</i>	Tier 4	[*]
<i>gnp ibuprofen 200 mg cap, 200 mg tab</i>	Tier 4	[*]
<i>gnp naproxen sodium 220 mg cap, 220 mg tab</i>	Tier 4	[*]
<i>gnp pain relief 325 mg tab</i>	Tier 4	[*]
<i>goodsense arthritis pain 1 % gel</i>	Tier 4	[*]
<i>goodsense aspirin 81 mg chew tab, 325 mg tab</i>	Tier 4	[*]
<i>goodsense aspirin adult low st 81 mg chew tab</i>	Tier 4	[*]
<i>goodsense ibuprofen 200 mg tab</i>	Tier 4	[*]

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>goodsense naproxen sodium 220 mg tab</i>	Tier 4	[*]
<i>goodsense pain relief 325 mg tab</i>	Tier 4	[*]
<i>hm aspirin 81 mg chew tab, 325 mg tab</i>	Tier 4	[*]
<i>hm aspirin ec 325 mg tab dr</i>	Tier 4	[*]
<i>hm aspirin ec low dose 81 mg tab dr</i>	Tier 4	[*]
<i>hm ibuprofen 200 mg cap, 200 mg tab</i>	Tier 4	[*]
<i>hm ibuprofen ib 200 mg tab</i>	Tier 4	[*]
<i>hm naproxen sodium 220 mg cap, 220 mg tab</i>	Tier 4	[*]
<i>hm pain reliever 325 mg tab</i>	Tier 4	[*]
<i>hydrocodone-acetaminophen 2.5-108 mg/5ml solution, 5-217 mg/10ml solution, 7.5-325 mg/15ml solution</i>	Tier 2	QL (2700 per 30 days); MO; NEDS
<i>hydrocodone-acetaminophen 5-325 mg tab, 7.5-325 mg tab, 10-325 mg tab</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>hydrocodone-ibuprofen 5-200 mg tab, 7.5-200 mg tab</i>	Tier 2	QL (50 per 10 days); MO; NEDS
<i>hydromorphone hcl 2 mg tab, 4 mg tab, 8 mg tab</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>ibu</i>	Tier 2	MO
<i>ibu-200 200 mg tab</i>	Tier 4	[*]
<i>ibuprofen 100 mg/5ml suspension, 400 mg tab, 600 mg tab, 800 mg tab</i>	Tier 2	MO
<i>ibuprofen 200 mg cap, 200 mg tab</i>	Tier 4	[*]
<i>indomethacin</i>	Tier 2	PA; MO
<i>indomethacin er</i>	Tier 2	PA; MO
<i>levorphanol tartrate 2 mg tab</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>meclofenamate sodium</i>	Tier 2	MO
<i>meloxicam 7.5 mg tab, 15 mg tab</i>	Tier 2	MO
<i>methadone hcl 10 mg/ml conc</i>	Tier 2	QL (180 per 30 days); NEDS
<i>methadone hcl 10 mg/ml solution</i>	Tier 2	QL (20 per 30 days); MO; NEDS

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>methadone hcl 5 mg tab, 10 mg tab</i>	Tier 2	PA; QL (180 per 30 days); MO; NEDS
<i>methadone hcl 5 mg/5ml solution, 10 mg/5ml solution</i>	Tier 2	QL (900 per 30 days); MO; NEDS
<i>methadone hcl intensol</i>	Tier 2	QL (180 per 30 days); NEDS
<i>morphine sulfate (concentrate)</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>morphine sulfate (pf) 0.5 mg/ml solution, 1 mg/ml solution, 4 mg/ml solution, 8 mg/ml solution, 10 mg/ml solution</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>MORPHINE SULFATE (PF) 1 MG/ML SOLUTION</i>	Tier 2	QL (180 per 30 days); NEDS
<i>MORPHINE SULFATE (PF) 2 MG/ML SOLUTION IV</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>morphine sulfate 1 mg/ml solution, 2 mg/ml solution, 4 mg/ml solution, 8 mg/ml solution, 15 mg tab, 30 mg tab</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>morphine sulfate 20 mg/5ml solution</i>	Tier 2	QL (900 per 30 days); MO; NEDS
<i>morphine sulfate 50 mg/ml solution</i>	Tier 2	QL (60 per 30 days); MO; NEDS
<i>morphine sulfate er 100 mg tab er, 200 mg tab er</i>	Tier 2	PA; QL (60 per 30 days); MO; NEDS
<i>morphine sulfate er 15 mg tab er, 30 mg tab er, 60 mg tab er</i>	Tier 2	PA; QL (90 per 30 days); MO; NEDS
<i>morphine sulfate iv soln pf 10 mg/ml</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>nabumetone</i>	Tier 2	MO
<i>nalbuphine hcl 10 mg/ml solution</i>	Tier 2	QL (60 per 30 days); MO; NEDS
<i>nalbuphine hcl 20 mg/ml solution</i>	Tier 2	QL (90 per 30 days); MO; NEDS
<i>naproxen 250 mg tab, 375 mg tab, 375 mg tab dr, 500 mg tab, 500 mg tab dr</i>	Tier 2	MO
<i>naproxen sodium</i>	Tier 2	MO
<i>naproxen sodium 220 mg cap, 220 mg tab</i>	Tier 4	[*]
<i>non-aspirin 325 mg tab</i>	Tier 4	[*]
<i>oxaprozin</i>	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>oxycodone hcl 5 mg cap, 5 mg tab, 10 mg tab, 10 mg/0.5ml conc, 15 mg tab, 20 mg tab, 30 mg tab, 100 mg/5ml conc</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>oxycodone-acetaminophen 2.5-325 mg tab, 5-325 mg tab, 7.5-325 mg tab, 10-325 mg tab</i>	Tier 2	QL (180 per 30 days); MO; NEDS
<i>pain relief regular strength 325 mg tab</i>	Tier 4	[*]
<i>pain reliever 325 mg tab</i>	Tier 4	[*]
<i>pharbetol 325 mg tab</i>	Tier 4	[*]
<i>piroxicam</i>	Tier 2	MO
<i>px pain relief extra strength 500 mg tab</i>	Tier 4	[*]
<i>qc aspirin 325 mg tab, 325 mg tab dr</i>	Tier 4	[*]
<i>qc aspirin low dose 81 mg chew tab, 81 mg tab dr</i>	Tier 4	[*]
<i>qc enteric aspirin 325 mg tab dr</i>	Tier 4	[*]
<i>qc ibuprofen 200 mg tab</i>	Tier 4	[*]
<i>qc ibuprofen ib 200 mg tab</i>	Tier 4	[*]
<i>qc naproxen sodium 220 mg tab</i>	Tier 4	[*]
<i>qc pain relief 325 mg tab</i>	Tier 4	[*]
<i>relafen</i>	Tier 2	MO
<i>sm aspirin 325 mg tab</i>	Tier 4	[*]
<i>sm aspirin adult low strength 81 mg chew tab, 81 mg tab dr</i>	Tier 4	[*]
<i>sm aspirin ec 325 mg tab dr</i>	Tier 4	[*]
<i>sm aspirin low dose 81 mg chew tab</i>	Tier 4	[*]
<i>sm childrens aspirin 81 mg chew tab</i>	Tier 4	[*]
<i>sm ibuprofen 200 mg cap, 200 mg tab</i>	Tier 4	[*]
<i>sm ibuprofen ib 200 mg tab</i>	Tier 4	[*]
<i>sm naproxen sodium 220 mg cap, 220 mg tab</i>	Tier 4	[*]
<i>sm pain reliever 325 mg tab</i>	Tier 4	[*]

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>st joseph low dose 81 mg chew tab</i>	Tier 4	[*]
<i>sulindac</i>	Tier 2	MO
<i>tramadol hcl 50 mg tab</i>	Tier 2	QL (240 per 30 days); MO; NEDS
<i>tramadol-acetaminophen</i>	Tier 2	QL (40 per 5 days); MO; NEDS
<i>tri-buffered aspirin 325 mg tab</i>	Tier 4	[*]
<b>ANESTHETICS</b>		
<i>glydo</i>	Tier 2	MO
<i>lidocaine 5 % ointment</i>	Tier 2	PA; QL (150 per 30 days); MO
<i>lidocaine 5 % patch</i>	Tier 2	PA; QL (90 per 30 days); MO
<i>lidocaine hcl (cardiac) pf 100 mg/5ml soln prsyr</i>	Tier 2	MO
<i>lidocaine hcl (pf) 2 % solution</i>	Tier 2	MO
<i>lidocaine hcl 4 % solution</i>	Tier 2	PA; QL (300 per 30 days); MO
<i>lidocaine hcl urethral/mucosal</i>	Tier 2	MO
<i>lidocaine viscous hcl</i>	Tier 2	MO
<i>lidocaine-prilocaine</i>	Tier 2	QL (30 per 30 days); MO
NAYZILAM	Tier 2	MO
<b>ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT AGENTS</b>		
<i>acamprosate calcium</i>	Tier 2	MO
<i>APO-VARENICLINE 0.5 MG TAB</i>	Tier 2	PA; QL (60 per 30 days); MO
<i>APO-VARENICLINE 1 MG TAB</i>	Tier 2	PA; QL (56 per 28 days); MO
<i>buprenorphine hcl 0.3 mg/ml solution</i>	Tier 2	QL (90 per 30 days); MO; NEDS
<i>buprenorphine hcl 2 mg sl tab</i>	Tier 2	QL (240 per 30 days); MO; NEDS
<i>buprenorphine hcl 8 mg sl tab</i>	Tier 2	QL (60 per 30 days); MO; NEDS
<i>buprenorphine hcl-naloxone hcl 2-0.5 mg sl tab</i>	Tier 1	QL (360 per 30 days); MO; NEDS
<i>buprenorphine hcl-naloxone hcl 8-2 mg sl tab</i>	Tier 1	QL (90 per 30 days); MO; NEDS
<i>bupropion hcl er (smoking det)</i>	Tier 2	QL (60 per 30 days); MO
CHANTIX 0.5 MG TAB	Tier 2	PA; QL (60 per 30 days); MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
CHANTIX 1 MG TAB	Tier 2	PA; QL (56 per 28 days); MO
CHANTIX CONTINUING MONTH PAK	Tier 2	PA; QL (56 per 28 days); MO
CHANTIX STARTING MONTH PAK	Tier 2	PA; MO
<i>disulfiram</i>	Tier 2	MO
<i>gnp nicotine mini 2 mg lozenge</i>	Tier 4	[*]
<i>gnp nicotine polacrilex 2 mg gum, 2 mg lozenge, 4 mg gum, 4 mg lozenge</i>	Tier 4	[*]
<i>goodsense nicotine 4 mg gum, 4 mg lozenge</i>	Tier 4	[*]
<i>hm nicotine polacrilex 2 mg gum, 2 mg lozenge, 4 mg gum, 4 mg lozenge</i>	Tier 4	[*]
<i>naloxone hcl 0.4 mg/ml soln cart, 0.4 mg/ml solution, 2 mg/2ml soln prsyr, 4 mg/10ml solution</i>	Tier 1	MO
<i>naloxone hcl 4 mg/0.1ml liquid</i>	Tier 2	MO
<i>naltrexone hcl</i>	Tier 2	MO
NARCAN	Tier 2	MO
NICORETTE 2 MG LOZENGE, 4 MG LOZENGE	Tier 4	[*]
NICORETTE MINI 2 MG LOZENGE, 4 MG LOZENGE	Tier 4	[*]
<i>nicotine 7 mg/24hr patch 24hr, 14 mg/24hr patch 24hr, 21 mg/24hr patch 24hr, 21-14-7 mg/24hr kit</i>	Tier 4	[*]
<i>nicotine polacrilex 2 mg gum, 2 mg lozenge, 4 mg gum, 4 mg lozenge</i>	Tier 4	[*]
NICOTROL NS	Tier 2	QL (120 per 30 days); MO
<i>sm nicotine 2 mg lozenge, 4 mg gum, 14 mg/24hr patch 24hr, 21 mg/24hr patch 24hr</i>	Tier 4	[*]
<i>sm nicotine polacrilex 2 mg gum, 4 mg gum, 4 mg lozenge</i>	Tier 4	[*]
<i>varenicline tartrate 0.5 mg tab</i>	Tier 2	PA; QL (60 per 30 days); MO
<i>varenicline tartrate 0.5 mg x 11 &amp; 1 mg x 42 tab thpk</i>	Tier 2	PA; MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
varenicline tartrate 1 mg tab	Tier 2	PA; QL (56 per 28 days); MO
<b>ANTIBACTERIALS</b>		
acetic acid 2 % solution	Tier 2	MO
amikacin sulfate	Tier 2	MO
amoxicillin 125 mg chew tab, 125 mg/5ml recon susp, 200 mg/5ml recon susp, 250 mg cap, 250 mg chew tab, 250 mg/5ml recon susp, 400 mg/5ml recon susp, 500 mg cap, 500 mg tab, 875 mg tab	Tier 2	MO
amoxicillin-pot clavulanate 200-28.5 mg chew tab, 200-28.5 mg/5ml recon susp, 250-125 mg tab, 250-62.5 mg/5ml recon susp, 400-57 mg chew tab, 400-57 mg/5ml recon susp, 500-125 mg tab, 600-42.9 mg/5ml recon susp, 875-125 mg tab	Tier 2	MO
amoxicillin-pot clavulanate er	Tier 2	MO
ampicillin	Tier 2	MO
ampicillin sodium 1 gm recon soln, 10 gm recon soln, 125 mg recon soln, 250 mg recon soln, 500 mg recon soln	Tier 2	MO
ampicillin sodium 2 gm recon soln for inj	Tier 2	MO
ampicillin sodium 2 gm recon soln for iv	Tier 2	MO
ampicillin-sulbactam sodium	Tier 2	MO
azithromycin 100 mg/5ml recon susp, 200 mg/5ml recon susp, 250 mg tab, 500 mg recon soln, 500 mg tab, 600 mg tab	Tier 2	MO
aztreonam	Tier 2	MO
bacitracin 500 unit/gm ointment	Tier 4	[*]
bacitracin zinc 500 unit/gm ointment	Tier 4	[*]
BICILLIN C-R	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
cefaclor 125 mg/5ml recon susp, 250 mg cap, 250 mg/5ml recon susp, 375 mg/5ml recon susp, 500 mg cap	Tier 2	MO
CEFACLOR ER	Tier 2	MO
cefadroxil 1 gm tab, 250 mg/5ml recon susp, 500 mg cap, 500 mg/5ml recon susp	Tier 2	MO
cefazolin sodium 1 gm recon soln, 2 gm recon soln, 10 gm recon soln, 100 gm recon soln, 300 gm recon soln, 500 mg recon soln	Tier 2	MO
CEFAZOLIN SODIUM-DEXTROSE 1-4 GM-%(50ML) RECON SOLN, 1-4 GM/50ML-% SOLUTION	Tier 2	MO
cefdinir 125 mg/5ml recon susp, 250 mg/5ml recon susp, 300 mg cap	Tier 2	MO
cefepime hcl 1 gm recon soln, 2 gm recon soln	Tier 2	MO
cefoxitin sodium	Tier 2	MO
CEFOXITIN SODIUM-DEXTROSE	Tier 2	MO
cefpodoxime proxetil 50 mg/5ml recon susp, 100 mg tab, 100 mg/5ml recon susp, 200 mg tab	Tier 2	MO
cefprozil 125 mg/5ml recon susp, 250 mg tab, 250 mg/5ml recon susp, 500 mg tab	Tier 2	MO
ceftazidime	Tier 2	MO
ceftriaxone sodium 1 gm recon soln, 2 gm recon soln, 10 gm recon soln, 100 gm recon soln, 250 mg recon soln, 500 mg recon soln	Tier 2	MO
ceftriaxone sodium for inj 1 gm	Tier 2	MO
ceftriaxone sodium for inj 2 gm	Tier 2	MO
ceftriaxone sodium in dextrose	Tier 2	MO
CEFTRIAXONE SODIUM-DEXTROSE	Tier 2	MO
cefuroxime axetil	Tier 2	MO
cefuroxime sodium	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>cephalexin 125 mg/5ml recon susp, 250 mg cap, 250 mg/5ml recon susp, 500 mg cap</i>	Tier 2	MO
<i>chloramphenicol sod succinate</i>	Tier 2	MO
<i>ciprofloxacin hcl 0.3 % solution, 250 mg tab, 500 mg tab, 750 mg tab</i>	Tier 2	MO
<i>ciprofloxacin in d5w 200 mg/100ml solution</i>	Tier 2	MO
<i>clarithromycin 125 mg/5ml recon susp, 250 mg tab, 250 mg/5ml recon susp, 500 mg tab</i>	Tier 2	MO
<i>clarithromycin er</i>	Tier 2	MO
<i>clindacin etz</i>	Tier 2	MO
<i>clindacin-p</i>	Tier 2	MO
<i>clindamycin hcl</i>	Tier 2	MO
<i>clindamycin phosphate 1 % swab, 2 % cream, 9 gm/60ml solution, 300 mg/2ml solution, 600 mg/4ml solution, 9000 mg/60ml solution</i>	Tier 2	MO
<i>colistimethate sodium (cba)</i>	Tier 2	MO
<i>DAPTO MYCIN , 350 MG RECON SOLN</i>	Tier 2	MO
<i>demeclacycline hcl</i>	Tier 2	MO
<i>dicloxacillin sodium</i>	Tier 2	MO
<i>doxy 100</i>	Tier 2	MO
<i>doxycycline hyclate 20 mg tab, 50 mg cap, 100 mg cap, 100 mg recon soln, 100 mg tab</i>	Tier 2	MO
<i>doxycycline monohydrate 50 mg cap, 50 mg tab, 75 mg cap, 100 mg cap, 100 mg tab</i>	Tier 2	MO
<i>e.e.s. 400</i>	Tier 2	MO
<i>ertapenem sodium</i>	Tier 2	MO
<i>ery-tab</i>	Tier 2	MO
<i>erythrocin lactobionate</i>	Tier 2	MO
<i>erythrocin stearate</i>	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>erythromycin 250 mg tab dr, 333 mg tab dr, 500 mg tab dr</i>	Tier 2	MO
<i>erythromycin base 250 mg tab dr, 333 mg tab dr, 500 mg tab dr</i>	Tier 2	MO
<i>erythromycin ethylsuccinate 400 mg tab</i>	Tier 2	MO
<i>erythromycin lactobionate</i>	Tier 2	MO
<i>erythromycin stearate</i>	Tier 2	MO
<i>fosfomycin tromethamine</i>	Tier 2	MO
<i>gentamicin sulfate 0.1 % cream, 0.1 % ointment</i>	Tier 2	QL (30 per 30 days); MO
<i>gentamicin sulfate 10 mg/ml solution, 40 mg/ml solution</i>	Tier 2	MO
<i>imipenem-cilastatin</i>	Tier 2	MO
<i>levofloxacin 25 mg/ml solution iv</i>	Tier 2	MO
<i>levofloxacin 250 mg tab, 500 mg tab, 750 mg tab</i>	Tier 2	MO
<i>levofloxacin in d5w</i>	Tier 2	MO
<i>linezolid 100 mg/5ml recon susp</i>	Tier 2	PA; QL (1800 per 30 days); MO
<i>linezolid 600 mg tab</i>	Tier 2	PA; QL (56 per 28 days); MO
<i>linezolid 600 mg/300ml solution</i>	Tier 2	MO
<i>linezolid in sodium chloride</i>	Tier 2	MO
<i>meropenem</i>	Tier 2	MO
<i>methenamine hippurate</i>	Tier 2	MO
<i>metronidazole 0.75 % cream, 0.75 % lotion, 250 mg tab, 375 mg cap, 500 mg tab, 500 mg/100ml solution</i>	Tier 2	MO
<i>metronidazole 0.75 % gel (topical)</i>	Tier 2	MO
<i>metronidazole 0.75 % gel vaginal</i>	Tier 2	MO
<i>minocycline hcl</i>	Tier 2	MO
<i>monodoxine nl</i>	Tier 2	MO
<i>moxifloxacin hcl 400 mg tab</i>	Tier 2	MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>nafcillin sodium 1 gm recon soln for inj</i>	Tier 2	MO
<i>nafcillin sodium 2 gm recon soln, 10 gm recon soln</i>	Tier 2	MO
<i>neomycin sulfate</i>	Tier 2	MO
<i>neomycin-polymyxin b gu</i>	Tier 2	MO
<i>nitrofurantoin macrocrystal 50 mg cap, 100 mg cap</i>	Tier 2	MO
<i>nitrofurantoin monohyd macro</i>	Tier 2	MO
<i>ofloxacin 300 mg tab, 400 mg tab</i>	Tier 2	MO
<i>oxacillin sodium</i>	Tier 2	MO
<i>paromomycin sulfate</i>	Tier 2	MO
<i>PENICILLIN G POT IN DEXTROSE</i>	Tier 2	MO
<i>penicillin g potassium</i>	Tier 2	MO
<i>PENICILLIN G PROCAINE</i>	Tier 2	MO
<i>penicillin g sodium</i>	Tier 2	MO
<i>penicillin v potassium 125 mg/5ml recon soln, 250 mg tab, 250 mg/5ml recon soln, 500 mg tab</i>	Tier 2	MO
<i>pfizerpen</i>	Tier 2	MO
<i>piperacillin sod-tazobactam soln</i>	Tier 2	MO
<i>rosadan</i>	Tier 2	MO
<i>sm double antibiotic 500-10000 unit/gm ointment</i>	Tier 4	[*]
<i>sm triple antibiotic 3.5-400-5000 ointment</i>	Tier 4	[*]
<i>streptomycin sulfate</i>	Tier 2	MO
<i>sulfacetamide sodium (acne)</i>	Tier 2	MO
<i>sulfadiazine</i>	Tier 2	MO
<i>sulfamethoxazole-trimethoprim 200-40 mg/5ml suspension, 400-80 mg tab, 400-80 mg/5ml solution, 800-160 mg tab</i>	Tier 2	MO
<i>SYNERCID</i>	Tier 2	MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
tazicef	Tier 2	MO
TEFLARO	Tier 2	MO
tetracycline hcl	Tier 2	MO
TIGECYCLINE	Tier 2	MO
<i>tobramycin sulfate 1.2 gm recon soln, 1.2 gm/30ml solution, 2 gm/50ml solution, 10 mg/ml solution, 80 mg/2ml solution</i>	Tier 2	MO
trimethoprim	Tier 2	MO
<i>triple antibiotic 3.5-400-5000 ointment</i>	Tier 4	[*]
VANCOMYCIN HCL 1 GM RECON SOLN, 1.25 GM RECON SOLN, 1.5 GM RECON SOLN, 5 GM RECON SOLN, 10 GM RECON SOLN, 500 MG RECON SOLN, 500 MG/100ML SOLUTION, 750 MG RECON SOLN, 750 MG/150ML SOLUTION, 1000 MG/200ML SOLUTION, 1250 MG/250ML SOLUTION, 1500 MG/300ML SOLUTION, 1750 MG/350ML SOLUTION, 2000 MG/400ML SOLUTION	Tier 2	MO
<i>vancomycin hcl 125 mg cap, 250 mg cap</i>	Tier 2	PA; QL (240 per 30 days); MO
VANCOMYCIN HCL IN DEXTROSE	Tier 2	MO
VANCOMYCIN HCL IN NACL	Tier 2	MO
VANDAZOLE	Tier 2	MO
XIFAXAN 550 MG TAB	Tier 2	PA; QL (84 per 28 days); MO
<b>ANTICONVULSANTS</b>		
APTIOM	Tier 2	ST; MO
BANZEL 200 MG TAB	Tier 2	PA; QL (480 per 30 days); MO
BANZEL 400 MG TAB	Tier 2	PA; QL (240 per 30 days); MO
BRIVIACT 10 MG TAB, 25 MG TAB, 50 MG TAB, 75 MG TAB, 100 MG TAB	Tier 2	PA; QL (60 per 30 days); MO
BRIVIACT 10 MG/ML SOLUTION	Tier 2	PA; QL (600 per 30 days); MO
BRIVIACT 50 MG/5ML SOLUTION	Tier 2	PA; MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>carbamazepine 100 mg chew tab, 100 mg/5ml suspension, 200 mg tab</i>	Tier 2	MO
<i>carbamazepine er</i>	Tier 2	MO
<i>CELONTIN</i>	Tier 2	MO
<i>clobazam 10 mg tab</i>	Tier 2	PA; QL (120 per 30 days); MO
<i>clobazam 2.5 mg/ml suspension</i>	Tier 2	PA; QL (480 per 30 days); MO
<i>clobazam 20 mg tab</i>	Tier 2	PA; QL (60 per 30 days); MO
<i>DIACOMIT 250 MG CAP, 250 MG PACKET</i>	Tier 2	PA; LA; QL (360 per 30 days)
<i>DIACOMIT 500 MG CAP, 500 MG PACKET</i>	Tier 2	PA; LA; QL (180 per 30 days)
<i>diazepam 2.5 mg gel, 10 mg gel, 20 mg gel</i>	Tier 2	MO
<i>DILANTIN 30 MG CAP, 100 MG CAP</i>	Tier 2	MO
<i>DILANTIN INFATABS</i>	Tier 2	MO
<i>divalproex sodium</i>	Tier 2	MO
<i>divalproex sodium er</i>	Tier 2	MO
<i>EPIDIOLEX</i>	Tier 2	PA; LA
<i>epitol</i>	Tier 2	MO
<i>EPRONTIA</i>	Tier 2	MO
<i>ethosuximide 250 mg cap, 250 mg/5ml solution</i>	Tier 2	MO
<i>felbamate 400 mg tab, 600 mg tab, 600 mg/5ml suspension</i>	Tier 2	MO
<i>FINTEPLA</i>	Tier 2	PA; LA
<i>fosphenytoin sodium</i>	Tier 2	MO
<i>FYCOMPA 0.5 MG/ML SUSPENSION</i>	Tier 2	QL (720 per 30 days); MO
<i>FYCOMPA 2 MG TAB, 4 MG TAB, 6 MG TAB, 8 MG TAB, 10 MG TAB, 12 MG TAB</i>	Tier 2	QL (30 per 30 days); MO
<i>gabapentin 100 mg cap</i>	Tier 1	QL (1080 per 30 days); MO
<i>gabapentin 250 mg/5ml solution, 300 mg/6ml solution</i>	Tier 2	QL (2160 per 30 days); MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>gabapentin 300 mg cap</i>	Tier 1	QL (360 per 30 days); MO
<i>gabapentin 400 mg cap</i>	Tier 1	QL (270 per 30 days); MO
<i>gabapentin 600 mg tab</i>	Tier 1	QL (180 per 30 days); MO
<i>gabapentin 800 mg tab</i>	Tier 1	QL (120 per 30 days); MO
<i>lacosamide 10 mg/ml solution</i>	Tier 2	QL (1200 per 30 days); MO
<i>lacosamide 100 mg tab, 150 mg tab, 200 mg tab</i>	Tier 2	QL (60 per 30 days); MO
<i>lacosamide 200 mg/20ml solution</i>	Tier 2	QL (1200 per 30 days); MO
<i>lacosamide 50 mg tab</i>	Tier 2	QL (60 per 30 days); MO
<i>lamotrigine 5 mg chew tab, 25 mg chew tab, 25 mg tab, 100 mg tab, 150 mg tab, 200 mg tab</i>	Tier 2	MO
<i>levetiracetam 100 mg/ml solution, 250 mg tab, 500 mg tab, 500 mg/5ml solution, 750 mg tab, 1000 mg tab</i>	Tier 2	MO
<i>levetiracetam er 500 mg tab er 24h</i>	Tier 2	QL (180 per 30 days); MO
<i>levetiracetam er 750 mg tab er 24h</i>	Tier 2	QL (120 per 30 days); MO
<i>levetiracetam in nacl</i>	Tier 2	MO
<i>oxcarbazepine 150 mg tab, 300 mg tab, 300 mg/5ml suspension, 600 mg tab</i>	Tier 2	MO
<i>phenobarbital 100 mg tab</i>	Tier 2	PA; QL (120 per 30 days); MO
<i>phenobarbital 15 mg tab</i>	Tier 2	PA; QL (800 per 30 days); MO
<i>phenobarbital 16.2 mg tab</i>	Tier 2	PA; QL (741 per 30 days); MO
<i>phenobarbital 20 mg/5ml elixir</i>	Tier 2	PA; QL (3000 per 30 days); MO
<i>phenobarbital 30 mg tab</i>	Tier 2	PA; QL (400 per 30 days); MO
<i>phenobarbital 32.4 mg tab</i>	Tier 2	PA; QL (370 per 30 days); MO
<i>phenobarbital 60 mg tab</i>	Tier 2	PA; QL (200 per 30 days); MO
<i>phenobarbital 64.8 mg tab</i>	Tier 2	PA; QL (185 per 30 days); MO
<i>phenobarbital 97.2 mg tab</i>	Tier 2	PA; QL (123 per 30 days); MO
<i>PHENYTEK</i>	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>phenytoin 50 mg chew tab, 100 mg/4ml suspension, 125 mg/5ml suspension</i>	Tier 2	MO
<i>phenytoin infatabs</i>	Tier 2	MO
<i>phenytoin sodium</i>	Tier 2	MO
<i>phenytoin sodium extended</i>	Tier 2	MO
<i>primidone</i>	Tier 2	MO
<i>roweepra</i>	Tier 2	MO
<i>rufinamide 200 mg tab</i>	Tier 2	PA; QL (480 per 30 days); MO
<i>rufinamide 40 mg/ml suspension</i>	Tier 2	PA; QL (2400 per 30 days); MO
<i>rufinamide 400 mg tab</i>	Tier 2	PA; QL (240 per 30 days); MO
<i>SPRITAM 250 MG TAB, 500 MG TAB, 1000 MG TAB</i>	Tier 2	PA; QL (60 per 30 days); MO
<i>SPRITAM 750 MG TAB</i>	Tier 2	PA; QL (120 per 30 days); MO
<i>subvenite</i>	Tier 2	MO
<i>SYMPAZAN 10 MG FILM, 20 MG FILM</i>	Tier 2	PA; QL (60 per 30 days); MO
<i>SYMPAZAN 5 MG FILM</i>	Tier 2	PA; QL (30 per 30 days); MO
<i>tiagabine hcl</i>	Tier 2	MO
<i>topiramate</i>	Tier 2	MO
<i>valproate sodium</i>	Tier 2	MO
<i>valproic acid 250 mg cap, 250 mg/5ml solution</i>	Tier 2	MO
<i>VALTOCO 10 MG DOSE</i>	Tier 2	MO
<i>VALTOCO 15 MG DOSE</i>	Tier 2	
<i>VALTOCO 20 MG DOSE</i>	Tier 2	
<i>VALTOCO 5 MG DOSE</i>	Tier 2	MO
<i>vigabatrin</i>	Tier 2	PA; LA; QL (180 per 30 days)
<i>vigadron</i>	Tier 2	PA; LA; QL (180 per 30 days)
<i>VIMPAT 10 MG/ML SOLUTION</i>	Tier 2	QL (1200 per 30 days); MO
<i>VIMPAT 150 MG TAB, 200 MG TAB</i>	Tier 2	QL (60 per 30 days)

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
VIMPAT 200 MG/20ML SOLUTION	Tier 2	QL (1200 per 30 days)
VIMPAT 50 MG TAB, 100 MG TAB	Tier 2	QL (60 per 30 days); MO
XCOPRI (250 MG DAILY DOSE)	Tier 2	QL (56 per 28 days); MO
XCOPRI (350 MG DAILY DOSE)	Tier 2	QL (56 per 28 days); MO
XCOPRI 14 X 12.5 MG & 14 X 25 MG TAB THPK, 14 X 150 MG & 14 X 200 MG TAB THPK, 14 X 50 MG & 14 X 100 MG TAB THPK	Tier 2	QL (56 per 365 over time); MO; NEDS
XCOPRI 150 MG TAB, 200 MG TAB	Tier 2	QL (60 per 30 days); MO
XCOPRI 50 MG TAB, 100 MG TAB	Tier 2	QL (30 per 30 days); MO
<i>zonisamide</i>	Tier 2	MO
ZTALMY	Tier 2	QL (1100 per 30 days)

## ANTIDEMENTIA AGENTS

<i>donepezil hcl 5 mg tab, 5 mg tab disp, 10 mg tab, 10 mg tab disp</i>	Tier 2	QL (30 per 30 days); MO
<i>ergoloid mesylates</i>	Tier 2	PA; MO
<i>memantine hcl 10 mg tab</i>	Tier 2	PA; QL (60 per 30 days); MO
<i>memantine hcl 2 mg/ml solution, 10 mg/5ml solution</i>	Tier 2	PA; QL (300 per 30 days); MO
<i>memantine hcl 5 mg tab</i>	Tier 2	PA; QL (90 per 30 days); MO
<i>memantine hcl er</i>	Tier 2	PA; QL (30 per 30 days); MO
NAMZARIC	Tier 2	MO
<i>rivastigmine</i>	Tier 2	QL (30 per 30 days); MO
<i>rivastigmine tartrate</i>	Tier 2	QL (60 per 30 days); MO

## ANTIDEPRESSANTS

<i>amitriptyline hcl</i>	Tier 2	MO
<i>amoxapine</i>	Tier 2	PA; MO
<i>bupropion hcl 100 mg tab</i>	Tier 2	QL (135 per 30 days); MO
<i>bupropion hcl 75 mg tab</i>	Tier 2	QL (180 per 30 days); MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
bupropion hcl er (sr) 100 mg tab er 12h	Tier 2	QL (120 per 30 days); MO
bupropion hcl er (sr) 150 mg tab er 12h, 200 mg tab er 12h	Tier 2	QL (60 per 30 days); MO
bupropion hcl er (xl) 150 mg tab er 24h	Tier 2	QL (90 per 30 days); MO
bupropion hcl er (xl) 300 mg tab er 24h	Tier 2	QL (30 per 30 days); MO
chlordiazepoxide-amitriptyline	Tier 2	PA; MO
citalopram hydrobromide 10 mg tab	Tier 2	QL (120 per 30 days); MO
citalopram hydrobromide 10 mg/5ml solution	Tier 2	QL (600 per 30 days); MO
citalopram hydrobromide 20 mg tab	Tier 2	QL (60 per 30 days); MO
citalopram hydrobromide 40 mg tab	Tier 2	QL (30 per 30 days); MO
clomipramine hcl	Tier 2	PA; MO
desipramine hcl	Tier 2	PA; MO
DESVENLAFAXINE ER	Tier 2	QL (30 per 30 days); MO
desvenlafaxine succinate er	Tier 2	MO
doxepin hcl 10 mg cap, 10 mg/ml conc, 25 mg cap, 50 mg cap, 75 mg cap, 100 mg cap, 150 mg cap	Tier 2	PA; MO
EMSAM	Tier 2	PA; QL (30 per 30 days); MO
escitalopram oxalate 10 mg tab	Tier 2	QL (60 per 30 days); MO
escitalopram oxalate 20 mg tab	Tier 2	QL (30 per 30 days); MO
escitalopram oxalate 5 mg tab	Tier 2	QL (120 per 30 days); MO
escitalopram oxalate 5 mg/5ml solution	Tier 2	QL (600 per 30 days); MO
FETZIMA	Tier 2	PA; QL (30 per 30 days); MO
FETZIMA TITRATION	Tier 2	PA; MO
fluoxetine hcl 10 mg cap	Tier 2	MO
fluoxetine hcl 20 mg cap	Tier 2	QL (120 per 30 days); MO
fluoxetine hcl 20 mg/5ml solution	Tier 2	QL (600 per 30 days); MO
fluoxetine hcl 40 mg cap	Tier 2	QL (60 per 30 days); MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>fluvoxamine maleate 100 mg tab</i>	Tier 2	QL (90 per 30 days); MO
<i>fluvoxamine maleate 25 mg tab, 50 mg tab</i>	Tier 2	MO
<i>imipramine hcl</i>	Tier 2	PA; MO
<i>LYBALVI</i>	Tier 2	QL (30 per 30 days)
<i>MARPLAN</i>	Tier 2	MO
<i>mirtazapine 15 mg tab disp, 30 mg tab disp, 45 mg tab, 45 mg tab disp</i>	Tier 2	QL (30 per 30 days); MO
<i>mirtazapine 7.5 mg tab, 15 mg tab, 30 mg tab</i>	Tier 2	MO
<i>nefazodone hcl 200 mg tab</i>	Tier 2	QL (90 per 30 days); MO
<i>nefazodone hcl 50 mg tab, 100 mg tab, 150 mg tab, 250 mg tab</i>	Tier 2	QL (60 per 30 days); MO
<i>nortriptyline hcl 10 mg cap, 10 mg/5ml solution, 25 mg cap, 50 mg cap, 75 mg cap</i>	Tier 2	MO
<i>olanzapine-fluoxetine hcl 3-25 mg cap, 6-25 mg cap</i>	Tier 2	QL (90 per 30 days); MO
<i>olanzapine-fluoxetine hcl 6-50 mg cap, 12-25 mg cap, 12-50 mg cap</i>	Tier 2	QL (30 per 30 days); MO
<i>paroxetine hcl 10 mg tab, 20 mg tab</i>	Tier 2	MO
<i>paroxetine hcl 10 mg/5ml suspension</i>	Tier 2	QL (900 per 30 days); MO
<i>paroxetine hcl 30 mg tab</i>	Tier 2	QL (60 per 30 days); MO
<i>paroxetine hcl 40 mg tab</i>	Tier 2	QL (45 per 30 days); MO
<i>PAXIL 10 MG/5ML SUSPENSION</i>	Tier 2	QL (900 per 30 days); MO
<i>phenelzine sulfate</i>	Tier 2	MO
<i>protriptyline hcl</i>	Tier 2	PA; MO
<i>sertraline hcl 100 mg tab</i>	Tier 2	QL (60 per 30 days); MO
<i>sertraline hcl 20 mg/ml conc</i>	Tier 2	QL (300 per 30 days); MO
<i>sertraline hcl 25 mg tab</i>	Tier 2	QL (240 per 30 days); MO
<i>sertraline hcl 50 mg tab</i>	Tier 2	QL (120 per 30 days); MO
<i>SPRAVATO (56 MG DOSE)</i>	Tier 2	PA; QL (16 per 28 days)

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
SPRAVATO (84 MG DOSE)	Tier 2	PA; QL (24 per 28 days)
<i>tranylcypromine sulfate</i>	Tier 2	MO
<i>trazodone hcl</i>	Tier 2	MO
<i>trimipramine maleate</i>	Tier 2	MO
TRINTELLIX	Tier 2	QL (30 per 30 days); MO
VENLAFAKINE BESYLATED ER	Tier 2	
<i>venlafaxine hcl 25 mg tab, 37.5 mg tab, 50 mg tab, 100 mg tab</i>	Tier 2	QL (90 per 30 days); MO
<i>venlafaxine hcl 75 mg tab</i>	Tier 2	MO
<i>venlafaxine hcl er 37.5 mg cap er 24h, 75 mg cap er 24h, 75 mg tab er 24h, 150 mg cap er 24h, 150 mg tab er 24h</i>	Tier 2	MO
<i>venlafaxine hcl er 37.5 mg tab er 24h</i>	Tier 2	QL (30 per 30 days); MO
VIIBRYD	Tier 2	ST; QL (30 per 30 days); MO
<i>vilazodone hcl</i>	Tier 2	ST; QL (30 per 30 days); MO
ZULRESSO	Tier 2	PA
<b>ANTIEMETICS</b>		
<i>aprepitant 125 mg cap</i>	Tier 2	B/D PA; QL (5 per 30 days); MO
<i>aprepitant 40 mg cap</i>	Tier 2	B/D PA; QL (1 per 28 days); MO
<i>aprepitant 80 mg cap</i>	Tier 2	B/D PA; QL (10 per 30 days); MO
<i>compro</i>	Tier 2	MO
<i>dramamine less drowsy 25 mg tab</i>	Tier 4	[*]
<i>dronabinol</i>	Tier 2	B/D PA; QL (120 per 30 days); MO
<i>gnp motion sickness relief 25 mg tab</i>	Tier 4	[*]
<i>meclizine hcl</i>	Tier 2	MO
<i>meclizine hcl 25 mg chew tab, 25 mg tab</i>	Tier 4	[*]
<i>metoclopramide hcl 5 mg tab, 5 mg/5ml solution, 5 mg/ml solution, 10 mg tab, 10 mg/10ml solution</i>	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>motion-time 25 mg chew tab</i>	Tier 4	[*]
<i>ondansetron</i>	Tier 2	B/D PA; QL (90 per 30 days); MO
<i>ondansetron hcl 24 mg tab</i>	Tier 2	B/D PA; QL (30 per 30 days); MO
<i>ondansetron hcl 4 mg tab, 8 mg tab</i>	Tier 2	B/D PA; QL (90 per 30 days); MO
<i>ondansetron hcl 4 mg/2ml soln prsyr, 4 mg/2ml solution, 40 mg/20ml solution</i>	Tier 2	MO
<i>perphenazine</i>	Tier 1	MO
<i>prochlorperazine</i>	Tier 2	MO
<i>prochlorperazine edisylate</i>	Tier 2	MO
<i>prochlorperazine maleate</i>	Tier 2	MO
<i>promethazine hcl 12.5 mg tab, 25 mg tab, 50 mg tab</i>	Tier 2	MO
<i>scopolamine</i>	Tier 2	QL (10 per 28 days); MO
<b>ANTIFUNGALS</b>		
<i>3 day vaginal 2 % cream</i>	Tier 4	[*]
<i>ABELCET</i>	Tier 2	B/D PA; MO
<i>AMBISOME</i>	Tier 2	B/D PA; MO
<i>amphotericin b</i>	Tier 2	B/D PA; MO
<i>amphotericin b liposome</i>	Tier 2	B/D PA
<i>antifungal (tolnaftate) 1 % cream</i>	Tier 4	[*]
<i>antifungal 2 % cream</i>	Tier 4	[*]
<i>athletes foot spray 1 % aerosol</i>	Tier 4	[*]
<i>ciclopirox olamine 0.77 % cream</i>	Tier 2	QL (90 per 30 days); MO
<i>ciclopirox olamine 0.77 % suspension</i>	Tier 2	MO
<i>clotrimazole 1 % cream, 1 % solution</i>	Tier 2	MO
<i>clotrimazole 1 % cream, 1 % solution</i>	Tier 4	[*]
<i>clotrimazole 10 mg troche</i>	Tier 2	QL (150 per 30 days); MO
<i>clotrimazole anti-fungal 1 % cream</i>	Tier 4	[*]

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
ERAXIS 100 MG RECON SOLN	Tier 2	PA; MO
fluconazole 10 mg/ml recon susp, 40 mg/ml recon susp, 50 mg tab, 100 mg tab, 150 mg tab, 200 mg tab	Tier 2	MO
fluconazole in sodium chloride 200-0.9 mg/100ml-% solution, 400-0.9 mg/200ml-% solution	Tier 2	MO
flucytosine	Tier 2	MO
gnp athletes foot 1 % cream	Tier 4	[*]
gnp clotrimazole 3 2 % cream	Tier 4	[*]
gnp miconazole 3 200 & 2 mg-% (9gm) kit	Tier 4	[*]
gnp miconazole 7 2 % cream	Tier 4	[*]
gnp terbinafine hydrochloride 1 % cream	Tier 4	[*]
gnp tolnaftate 1 % cream	Tier 4	[*]
griseofulvin microsize 125 mg/5ml suspension	Tier 2	MO
griseofulvin ultramicrosize	Tier 2	MO
itraconazole 100 mg cap	Tier 2	PA; MO
ketoconazole 2 % cream, 2 % shampoo	Tier 2	QL (120 per 30 days); MO
ketoconazole 200 mg tab	Tier 2	MO
LAMISIL AT 1 % CREAM	Tier 4	[*]
micafungin sodium , 100 mg recon soln	Tier 2	
miconazole 3 200 mg suppos	Tier 2	MO
miconazole 3 combo-supp 200 & 2 mg-% (9gm) kit	Tier 4	[*]
miconazole 7 2 % cream, 100 mg suppos	Tier 4	[*]
miconazole nitrate 2 % cream	Tier 4	[*]
NOXAFIL 40 MG/ML SUSPENSION	Tier 2	PA; MO
nyamyc	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>nystatin 100000 unit/gm cream, 100000 unit/gm ointment, 100000 unit/gm powder, 100000 unit/ml suspension, 500000 unit tab</i>	Tier 2	MO
<i>nystop</i>	Tier 2	MO
<i>posaconazole</i>	Tier 2	PA; MO
<i>qc 3 day 4 % cream</i>	Tier 4	[*]
<i>qc miconazole 7 2 % cream</i>	Tier 4	[*]
<i>qc tolnaftate 1 % cream</i>	Tier 4	[*]
<i>sm 3-day vaginal 2 % cream</i>	Tier 4	[*]
<i>sm antifungal clotrimazole 1 % cream</i>	Tier 4	[*]
<i>sm antifungal miconazole 2 % cream</i>	Tier 4	[*]
<i>sm antifungal tolnaftate 1 % cream</i>	Tier 4	[*]
<i>sm athletes foot 1 % cream</i>	Tier 4	[*]
<i>sm clotrimazole vaginal 1 % cream</i>	Tier 4	[*]
<i>sm miconazole 3 200 &amp; 2 mg-% (9gm) kit</i>	Tier 4	[*]
<i>sm miconazole 7 2 % cream, 100 mg suppos</i>	Tier 4	[*]
<i>terbinafine hcl</i>	Tier 2	MO
<i>terbinafine hcl 1 % cream</i>	Tier 4	[*]
<i>terconazole 0.4 % cream, 0.8 % cream, 80 mg suppos</i>	Tier 2	MO
<i>tolnaftate 1 % cream</i>	Tier 4	[*]
<i>voriconazole 200 mg tab</i>	Tier 2	PA; QL (60 per 30 days); MO
<i>voriconazole 40 mg/ml recon susp</i>	Tier 2	PA; QL (300 per 30 days); MO
<i>voriconazole 50 mg tab, 200 mg recon soln</i>	Tier 2	PA; MO
<b>ANTIGOUT AGENTS</b>		
<i>allopurinol 100 mg tab, 300 mg tab</i>	Tier 2	MO
<i>colchicine</i>	Tier 1	MO
<i>colchicine-probenecid</i>	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>febuxostat</i>	Tier 2	ST; MO
<i>probenecid</i>	Tier 2	MO
<b>ANTIMIGRAINE AGENTS</b>		
<i>AIMOVIG 140 MG/ML SOLN A-INJ</i>	Tier 2	PA; QL (1 per 28 days); MO
<i>AIMOVIG 70 MG/ML SOLN A-INJ</i>	Tier 2	PA; QL (2 per 28 days); MO
<i>dihydroergotamine mesylate 4 mg/ml solution</i>	Tier 2	QL (8 per 28 days); MO
<i>EMGALITY</i>	Tier 2	PA; QL (2 per 28 days); MO
<i>EMGALITY (300 MG DOSE)</i>	Tier 2	PA; QL (3 per 28 days); MO
<i>ERGOMAR</i>	Tier 2	MO
<i>ergotamine-caffeine</i>	Tier 2	MO
<i>rizatriptan benzoate</i>	Tier 2	QL (12 per 30 days); MO
<i>sumatriptan</i>	Tier 2	MO
<i>sumatriptan succinate 25 mg tab, 50 mg tab, 100 mg tab</i>	Tier 2	QL (9 per 30 days); MO
<i>sumatriptan succinate 4 mg/0.5ml soln a-inj, 6 mg/0.5ml soln a-inj</i>	Tier 2	QL (6 per 30 days); MO
<i>UBRELVY</i>	Tier 2	PA; QL (16 per 30 days); MO
<i>zolmitriptan 2.5 mg tab, 2.5 mg tab disp, 5 mg tab, 5 mg tab disp</i>	Tier 2	QL (9 per 30 days); MO
<b>ANTIMYASTHENIC AGENTS</b>		
<i>pyridostigmine bromide 30 mg tab, 60 mg tab, 60 mg/5ml solution</i>	Tier 2	MO
<b>ANTIMYCOBACTERIALS</b>		
<i>dapsone 25 mg tab, 100 mg tab</i>	Tier 2	MO
<i>ethambutol hcl</i>	Tier 2	MO
<i>isoniazid 50 mg/5ml syrup, 100 mg tab, 300 mg tab</i>	Tier 2	MO
<i>PASER</i>	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
PRIFTIN	Tier 2	MO
<i>pyrazinamide</i>	Tier 2	MO
<i>rifabutin</i>	Tier 2	MO
<i>rifampin</i>	Tier 2	MO
SIRTURO	Tier 2	PA; LA
TRECATOR	Tier 2	MO
<b>ANTINEOPLASTICS</b>		
<i>abiraterone acetate 250 mg tab</i>	Tier 2	PA; QL (120 per 30 days)
<i>abiraterone acetate 500 mg tab</i>	Tier 2	PA; QL (60 per 30 days)
ABRAXANE	Tier 2	PA
<i>adriamycin 10 mg recon soln</i>	Tier 2	B/D PA
<i>adriamycin 2 mg/ml solution, 50 mg recon soln</i>	Tier 2	B/D PA
AFINITOR 10 MG TAB	Tier 2	PA
AFINITOR DISPERZ	Tier 2	PA
ALECENSA	Tier 2	PA; LA; QL (240 per 30 days)
ALIMTA	Tier 2	PA
ALIQOPA	Tier 2	PA; LA
ALUNBRIG 180 MG TAB	Tier 2	PA; LA; QL (30 per 30 days)
ALUNBRIG 30 MG TAB	Tier 2	PA; LA; QL (180 per 30 days)
ALUNBRIG 90 & 180 MG TAB THPK	Tier 2	PA; LA; QL (30 per 180 over time); NEDS
ALUNBRIG 90 MG TAB	Tier 2	PA; LA; QL (60 per 30 days)
<i>anastrozole</i>	Tier 2	QL (30 per 30 days); MO
ARRANON	Tier 2	B/D PA
<i>arsenic trioxide</i>	Tier 2	B/D PA
ARZERRA	Tier 2	PA
ASPARLAS	Tier 2	PA
AVASTIN	Tier 2	PA; LA

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
AYVAKIT	Tier 2	PA; LA; QL (30 per 30 days)
<i>azacitidine</i>	Tier 2	PA; LA
BALVERSA 3 MG TAB	Tier 2	PA; LA; QL (90 per 30 days)
BALVERSA 4 MG TAB	Tier 2	PA; LA; QL (60 per 30 days)
BALVERSA 5 MG TAB	Tier 2	PA; LA; QL (30 per 30 days)
BAVENCIO	Tier 2	PA; LA
BELEODAQ	Tier 2	PA
BENDEKA	Tier 2	B/D PA
BESPONSA	Tier 2	B/D PA; LA
BESREMI	Tier 2	PA; LA
<i>bexarotene 1 % gel</i>	Tier 2	PA; QL (60 per 30 days)
<i>bexarotene 75 mg cap</i>	Tier 2	PA; QL (300 per 30 days)
<i>bicalutamide</i>	Tier 2	QL (30 per 30 days); MO
BLENREP	Tier 2	PA
<i>bleomycin sulfate</i>	Tier 2	B/D PA
BLINCYTO	Tier 2	PA
BORTEZOMIB , 3.5 MG RECON SOLN	Tier 2	PA
BOSULIF 100 MG TAB	Tier 2	PA; QL (120 per 30 days)
BOSULIF 400 MG TAB, 500 MG TAB	Tier 2	PA; QL (30 per 30 days)
BRAFTOVI	Tier 2	PA; LA; QL (180 per 30 days)
BRUKINSA	Tier 2	PA; LA; QL (120 per 30 days)
<i>busulfan</i>	Tier 2	B/D PA
CABOMETYX	Tier 2	PA; LA; QL (30 per 30 days)
CALQUENCE 100 MG CAP	Tier 2	PA; LA
CAPRELSA 100 MG TAB	Tier 2	PA; LA; QL (90 per 30 days)
CAPRELSA 300 MG TAB	Tier 2	PA; LA; QL (30 per 30 days)
<i>carboplatin</i>	Tier 2	B/D PA

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>carmustine</i>	Tier 2	B/D PA
<i>cisplatin</i>	Tier 2	B/D PA
<i>cladribine</i>	Tier 2	B/D PA
<i>clofarabine</i>	Tier 2	B/D PA
COMETRIQ (100 MG DAILY DOSE)	Tier 2	PA; LA; QL (56 per 28 days)
COMETRIQ (140 MG DAILY DOSE)	Tier 2	PA; LA; QL (112 per 28 days)
COMETRIQ (60 MG DAILY DOSE)	Tier 2	PA; LA; QL (84 per 28 days)
COPIKTRA	Tier 2	PA; LA; QL (60 per 30 days)
COTELLIC	Tier 2	PA; LA; QL (90 per 30 days)
CYCLOPHOSPHAMIDE 1 GM/5ML SOLUTION, 2 GM/10ML SOLUTION, 500 MG/2.5ML SOLUTION	Tier 2	
<i>cyclophosphamide 25 mg cap, 50 mg cap</i>	Tier 2	B/D PA
CYRAMZA	Tier 2	PA; LA
<i>cytarabine</i>	Tier 2	B/D PA
<i>cytarabine (pf)</i>	Tier 2	B/D PA
<i>dacarbazine</i>	Tier 2	B/D PA
<i>dactinomycin</i>	Tier 2	B/D PA
DARZALEX	Tier 2	PA; LA
DARZALEX FASPRO	Tier 2	PA
<i>daunorubicin hcl 20 mg/4ml solution, 50 mg/10ml solution</i>	Tier 2	B/D PA
DAURISMO 100 MG TAB	Tier 2	PA; LA; QL (30 per 30 days)
DAURISMO 25 MG TAB	Tier 2	PA; LA; QL (60 per 30 days)
<i>decitabine</i>	Tier 2	B/D PA
<i>dexrazoxane hcl</i>	Tier 2	B/D PA
DOCETAXEL 20 MG/2ML SOLUTION, 80 MG/8ML SOLUTION, 160 MG/16ML SOLUTION	Tier 2	B/D PA

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>docetaxel 20 mg/ml conc, 80 mg/4ml conc, 160 mg/8ml conc</i>	Tier 2	B/D PA
<i>doxorubicin hcl 10 mg recon soln</i>	Tier 2	B/D PA
<i>doxorubicin hcl 2 mg/ml solution</i>	Tier 2	B/D PA
<i>doxorubicin hcl 50 mg recon soln</i>	Tier 2	
<i>doxorubicin hcl liposomal</i>	Tier 2	PA
DROXIA	Tier 2	MO
ELITEK	Tier 2	PA
EMCYT	Tier 2	
EMPPLICITI	Tier 2	PA; LA
ENHERTU	Tier 2	PA
<i>epirubicin hcl</i>	Tier 2	B/D PA
ERBITUX	Tier 2	PA
ERIVEDGE	Tier 2	PA; LA; QL (30 per 30 days)
ERLEADA	Tier 2	PA; LA
<i>erlotinib hcl 100 mg tab, 150 mg tab</i>	Tier 2	PA; QL (30 per 30 days)
<i>erlotinib hcl 25 mg tab</i>	Tier 2	PA; QL (90 per 30 days)
ETOPOPHOS	Tier 2	B/D PA
<i>etoposide</i>	Tier 2	B/D PA
<i>everolimus 2 mg tab sol, 2.5 mg tab, 3 mg tab sol, 5 mg tab, 5 mg tab sol, 7.5 mg tab, 10 mg tab</i>	Tier 2	PA
EVOMELA	Tier 2	B/D PA
<i>exemestane</i>	Tier 2	QL (60 per 30 days); MO
EXKIVITY	Tier 2	PA; LA; QL (120 per 30 days)
<i>fludarabine phosphate 50 mg recon soln, 50 mg/2ml solution</i>	Tier 2	B/D PA
<i>fluorouracil 1 gm/20ml solution, 2.5 gm/50ml solution, 5 gm/100ml solution, 500 mg/10ml solution</i>	Tier 2	B/D PA

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>flutamide</i>	Tier 2	MO
FOLOTYN	Tier 2	B/D PA
FOTIVDA	Tier 2	PA; QL (21 per 28 days)
<i>fulvestrant</i>	Tier 2	PA
GAVRETO	Tier 2	PA; LA; QL (120 per 30 days)
GAZYVA	Tier 2	PA; LA
<i>gemcitabine hcl 1 gm recon soln, 1 gm/26.3ml solution, 2 gm recon soln, 2 gm/52.6ml solution, 200 mg recon soln, 200 mg/5.26ml solution</i>	Tier 2	B/D PA
GEMCITABINE HCL 1 GM/10ML SOLUTION, 2 GM/20ML SOLUTION, 200 MG/2ML SOLUTION	Tier 2	B/D PA
GILOTRIF	Tier 2	PA; LA; QL (30 per 30 days)
HALAVEN	Tier 2	PA
HERCEPTIN	Tier 2	B/D PA
HERCEPTIN HYLECTA	Tier 2	B/D PA
<i>hydroxyurea</i>	Tier 2	MO
IBRANCE	Tier 2	PA; LA; QL (21 per 28 days)
ICLUSIG	Tier 2	PA; LA; QL (30 per 30 days)
<i>idarubicin hcl</i>	Tier 2	B/D PA
IDHIFA 100 MG TAB	Tier 2	PA; LA; QL (30 per 30 days)
IDHIFA 50 MG TAB	Tier 2	PA; LA; QL (60 per 30 days)
IFEX 3 GM RECON SOLN	Tier 2	B/D PA
<i>ifosfamide 1 gm recon soln, 1 gm/20ml solution, 3 gm recon soln, 3 gm/60ml solution</i>	Tier 2	B/D PA
<i>imatinib mesylate</i>	Tier 2	PA; QL (60 per 30 days)
IMBRUVICA 140 MG CAP, 140 MG TAB	Tier 2	PA; LA; QL (90 per 30 days)
IMBRUVICA 70 MG CAP, 280 MG TAB, 420 MG TAB, 560 MG TAB	Tier 2	PA; LA; QL (30 per 30 days)
IMBRUVICA 70 MG/ML SUSPENSION	Tier 2	PA; LA; QL (216 per 27 days)

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
IMFINZI	Tier 2	PA; LA
IMLYGIC	Tier 2	PA
INLYTA 1 MG TAB	Tier 2	PA; LA; QL (180 per 30 days)
INLYTA 5 MG TAB	Tier 2	PA; LA; QL (120 per 30 days)
INQOVI	Tier 2	PA; LA; QL (5 per 28 days)
INREBIC	Tier 2	PA; LA; QL (120 per 30 days)
IRESSA	Tier 2	PA; LA; QL (30 per 30 days)
<i>irinotecan hcl</i>	Tier 2	B/D PA
ISTODAX (OVERFILL)	Tier 2	PA
IXEMPRA KIT	Tier 2	PA
JAKAFI	Tier 2	PA; LA; QL (60 per 30 days)
JEMPERLI	Tier 2	PA
JEVTANA	Tier 2	PA
KADCYLA	Tier 2	PA
KEYTRUDA	Tier 2	PA
KHAPZORY	Tier 2	PA
KISQALI (200 MG DOSE)	Tier 2	PA; QL (21 per 21 days)
KISQALI (400 MG DOSE)	Tier 2	PA; QL (42 per 21 days)
KISQALI (600 MG DOSE)	Tier 2	PA; QL (63 per 21 days)
KISQALI FEMARA (400 MG DOSE)	Tier 2	PA; QL (70 per 28 days)
KISQALI FEMARA (600 MG DOSE)	Tier 2	PA; QL (91 per 28 days)
KISQALI FEMARA(200 MG DOSE)	Tier 2	PA; QL (49 per 28 days)
KYPROLIS	Tier 2	PA; LA
<i>lapatinib ditosylate</i>	Tier 2	PA; QL (180 per 30 days)
<i>lenalidomide 10 mg cap</i>	Tier 2	PA; LA; QL (60 per 30 days)
<i>lenalidomide 2.5 mg cap, 15 mg cap, 20 mg cap, 25 mg cap</i>	Tier 2	PA; LA; QL (30 per 30 days)

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>lenalidomide 5 mg cap</i>	Tier 2	PA; LA; QL (150 per 30 days)
LENVIMA (10 MG DAILY DOSE)	Tier 2	PA; LA; QL (30 per 30 days)
LENVIMA (12 MG DAILY DOSE)	Tier 2	PA; LA; QL (90 per 30 days)
LENVIMA (14 MG DAILY DOSE)	Tier 2	PA; LA; QL (60 per 30 days)
LENVIMA (18 MG DAILY DOSE)	Tier 2	PA; LA; QL (90 per 30 days)
LENVIMA (20 MG DAILY DOSE)	Tier 2	PA; LA; QL (60 per 30 days)
LENVIMA (24 MG DAILY DOSE)	Tier 2	PA; LA; QL (90 per 30 days)
LENVIMA (4 MG DAILY DOSE)	Tier 2	PA; LA; QL (30 per 30 days)
LENVIMA (8 MG DAILY DOSE)	Tier 2	PA; LA; QL (60 per 30 days)
<i>letrozole</i>	Tier 2	QL (30 per 30 days); MO
<i>leucovorin calcium 100 mg/10ml solution</i>	Tier 2	MO
<i>leucovorin calcium 5 mg tab, 10 mg tab, 15 mg tab, 25 mg tab</i>	Tier 2	MO
<i>leucovorin calcium 50 mg recon soln, 100 mg recon soln, 200 mg recon soln, 350 mg recon soln, 500 mg recon soln</i>	Tier 2	B/D PA; MO
LEUKERAN	Tier 2	MO
<i>levoleucovorin calcium</i>	Tier 2	PA
LIBTAYO	Tier 2	PA; LA
LONSURF	Tier 2	PA
LORBRENA 100 MG TAB	Tier 2	PA; LA; QL (30 per 30 days)
LORBRENA 25 MG TAB	Tier 2	PA; LA; QL (90 per 30 days)
LUMAKRAS	Tier 2	PA; LA; QL (240 per 30 days)
LUMOXITI	Tier 2	PA; LA
LYNPARZA	Tier 2	PA; LA; QL (120 per 30 days)
MATULANE	Tier 2	LA
MEKINIST 0.5 MG TAB	Tier 2	PA; LA; QL (90 per 30 days)
MEKINIST 2 MG TAB	Tier 2	PA; LA; QL (30 per 30 days)

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
MEKTOVI	Tier 2	PA; LA; QL (180 per 30 days)
<i>melphalan hcl</i>	Tier 2	B/D PA
<i>mercaptopurine</i>	Tier 2	MO
<i>mesna</i>	Tier 2	MO
MESNEX 400 MG TAB	Tier 2	MO
<i>mitomycin</i>	Tier 2	B/D PA
<i>mitoxantrone hcl</i>	Tier 2	B/D PA
MONJUVI	Tier 2	PA
<i>mutamycin</i>	Tier 2	B/D PA
MYLOTARG	Tier 2	PA; LA
<i>nelarabine</i>	Tier 2	B/D PA
NERLYNX	Tier 2	PA; LA; QL (180 per 30 days)
NEXAVAR	Tier 2	PA; LA; QL (120 per 30 days)
<i>nilutamide</i>	Tier 2	QL (30 per 30 days); MO
NINLARO	Tier 2	PA; QL (3 per 28 days)
NIPENT	Tier 2	B/D PA
NUBEQA	Tier 2	PA; LA; QL (120 per 30 days)
ODOMZO	Tier 2	PA; LA; QL (30 per 30 days)
ONUREG	Tier 2	PA; LA; QL (14 per 28 days)
OPDIVO	Tier 2	PA; LA
<i>oxaliplatin 50 mg recon soln, 50 mg/10ml solution, 100 mg recon soln, 100 mg/20ml solution, 200 mg/40ml solution</i>	Tier 2	B/D PA
<i>paclitaxel 100 mg/16.7ml conc</i>	Tier 2	B/D PA
<i>paclitaxel 30 mg/5ml conc, 150 mg/25ml conc</i>	Tier 2	B/D PA
<i>paclitaxel 300 mg/50ml conc</i>	Tier 2	
<i>paclitaxel protein-bound part</i>	Tier 2	PA
PADCEV	Tier 2	PA

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
PANRETIN	Tier 2	
<i>paraplatin</i>	Tier 2	B/D PA
PEMAZYRE	Tier 2	PA; LA; QL (14 per 21 days)
<i>pemetrexed disodium 100 mg recon soln, 500 mg recon soln, 750 mg recon soln, 1000 mg recon soln</i>	Tier 2	PA
PERJETA	Tier 2	PA
PHESGO	Tier 2	PA
PIQRAY (200 MG DAILY DOSE)	Tier 2	PA; QL (28 per 28 days)
PIQRAY (250 MG DAILY DOSE)	Tier 2	PA; QL (56 per 28 days)
PIQRAY (300 MG DAILY DOSE)	Tier 2	PA; QL (56 per 28 days)
POLIVY	Tier 2	B/D PA
POMALYST	Tier 2	PA; LA; QL (21 per 28 days)
PORTRAZZA	Tier 2	LA
POTELIGEO	Tier 2	B/D PA; LA
PURIXAN	Tier 2	PA
QINLOCK	Tier 2	PA; QL (90 per 30 days)
RETEVMO 40 MG CAP	Tier 2	PA; QL (180 per 30 days)
RETEVMO 80 MG CAP	Tier 2	PA; QL (120 per 30 days)
REVLIMID 10 MG CAP	Tier 2	PA; LA; QL (60 per 30 days)
REVLIMID 2.5 MG CAP, 15 MG CAP, 20 MG CAP, 25 MG CAP	Tier 2	PA; LA; QL (30 per 30 days)
REVLIMID 5 MG CAP	Tier 2	PA; LA; QL (150 per 30 days)
RIABNI	Tier 2	B/D PA
RITUXAN	Tier 2	B/D PA; LA
RITUXAN HYCELA	Tier 2	B/D PA; LA
ROMIDEPSIN 10 MG RECON SOLN, 27.5 MG/5.5ML SOLUTION	Tier 2	PA

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
ROZLYTREK 100 MG CAP	Tier 2	PA; LA; QL (150 per 30 days)
ROZLYTREK 200 MG CAP	Tier 2	PA; LA; QL (90 per 30 days)
RUBRACA	Tier 2	PA; LA; QL (120 per 30 days)
RYBREVANT	Tier 2	PA
RYDAPT	Tier 2	PA; QL (240 per 30 days)
RYLAZE	Tier 2	PA; MO
SARCLISA	Tier 2	PA
SCEMBLIX 20 MG TAB	Tier 2	PA; QL (60 per 30 days)
SCEMBLIX 40 MG TAB	Tier 2	PA; QL (300 per 30 days)
SOLTAMOX	Tier 2	MO
<i>sorafenib tosylate</i>	Tier 2	PA; QL (120 per 30 days)
SPRYCEL	Tier 2	PA; QL (30 per 30 days)
STIVARGA	Tier 2	PA; LA; QL (84 per 28 days)
<i>sunitinib malate</i>	Tier 2	PA; QL (30 per 30 days)
SUTENT	Tier 2	PA; QL (30 per 30 days)
SYNRIBO	Tier 2	PA
TABLOID	Tier 2	MO
TABRECTA	Tier 2	PA; QL (120 per 30 days)
TAFINLAR	Tier 2	PA; LA; QL (120 per 30 days)
TAGRISSO	Tier 2	PA; LA; QL (30 per 30 days)
TALZENNA 0.25 MG CAP	Tier 2	PA; LA; QL (90 per 30 days)
TALZENNA 0.5 MG CAP, 0.75 MG CAP, 1 MG CAP	Tier 2	PA; LA; QL (30 per 30 days)
<i>tamoxifen citrate</i>	Tier 2	MO
TARGETIN 1 % GEL	Tier 2	PA; QL (60 per 30 days)
TASIGNA	Tier 2	PA; QL (112 per 28 days)
TAZVERIK	Tier 2	PA; LA; QL (240 per 30 days)
TECENTRIQ 1200 MG/20ML SOLUTION	Tier 2	PA; LA; QL (20 per 21 days)

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
TECENTRIQ 840 MG/14ML SOLUTION	Tier 2	PA; LA; QL (28 per 28 days)
TEPMETKO	Tier 2	PA; LA; QL (60 per 30 days)
THALOMID 150 MG CAP, 200 MG CAP	Tier 2	PA; QL (60 per 30 days)
THALOMID 50 MG CAP, 100 MG CAP	Tier 2	PA; QL (30 per 30 days)
<i>thiotepa</i>	Tier 2	B/D PA
TIBSOVO	Tier 2	PA; LA; QL (60 per 30 days)
TICE BCG	Tier 2	B/D PA
<i>toposar 1 gm/50ml solution, 100 mg/5ml solution</i>	Tier 2	B/D PA
<i>topotecan hcl 4 mg recon soln, 4 mg/4ml solution</i>	Tier 2	B/D PA
<i>toremifene citrate</i>	Tier 2	QL (30 per 30 days)
TREANDA	Tier 2	B/D PA
<i>tretinooin 10 mg cap</i>	Tier 2	MO
TRUSELTIQ (100MG DAILY DOSE)	Tier 2	PA; LA; QL (21 per 28 days)
TRUSELTIQ (125MG DAILY DOSE)	Tier 2	PA; LA; QL (42 per 28 days)
TRUSELTIQ (50MG DAILY DOSE)	Tier 2	PA; LA; QL (42 per 28 days)
TRUSELTIQ (75MG DAILY DOSE)	Tier 2	PA; LA; QL (63 per 28 days)
TUKYSA	Tier 2	PA; LA; QL (120 per 30 days)
TURALIO	Tier 2	PA; LA; QL (120 per 30 days)
VALCHLOR	Tier 2	PA; LA
VECTIBIX	Tier 2	PA
VELCADE	Tier 2	PA
VENCLEXTA 10 MG TAB	Tier 2	PA; LA; QL (60 per 30 days)
VENCLEXTA 100 MG TAB	Tier 2	PA; LA; QL (180 per 30 days)
VENCLEXTA 50 MG TAB	Tier 2	PA; LA; QL (30 per 30 days)
VENCLEXTA STARTING PACK	Tier 2	PA; LA
VERZENIO	Tier 2	PA; LA; QL (60 per 30 days)
<i>vinblastine sulfate</i>	Tier 2	B/D PA

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>vincasar pfs</i>	Tier 2	B/D PA
<i>vincristine sulfate</i>	Tier 2	B/D PA
<i>vinorelbine tartrate</i>	Tier 2	B/D PA
VITRAKVI 100 MG CAP	Tier 2	PA; LA; QL (60 per 30 days)
VITRAKVI 20 MG/ML SOLUTION	Tier 2	PA; LA; QL (300 per 30 days)
VITRAKVI 25 MG CAP	Tier 2	PA; LA; QL (180 per 30 days)
VIZIMPRO	Tier 2	PA; LA; QL (30 per 30 days)
VONJO	Tier 2	PA; LA; QL (120 per 30 days)
VOTRIENT	Tier 2	PA; LA; QL (120 per 30 days)
VYXEOS	Tier 2	B/D PA
WELIREG	Tier 2	PA; LA; QL (90 per 30 days)
XALKORI	Tier 2	PA; LA; QL (120 per 30 days)
XOSPATA	Tier 2	PA; LA; QL (90 per 30 days)
XPOVIO (100 MG ONCE WEEKLY) 20 MG TAB THPK	Tier 2	PA; LA; QL (20 per 28 days)
XPOVIO (100 MG ONCE WEEKLY) 50 MG TAB THPK	Tier 2	PA; LA; QL (8 per 28 days)
XPOVIO (40 MG ONCE WEEKLY) 20 MG TAB THPK	Tier 2	PA; LA; QL (8 per 28 days)
XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK	Tier 2	PA; LA; QL (4 per 28 days)
XPOVIO (40 MG TWICE WEEKLY) 20 MG TAB THPK	Tier 2	PA; LA; QL (16 per 28 days)
XPOVIO (40 MG TWICE WEEKLY) 40 MG TAB THPK	Tier 2	PA; LA; QL (8 per 28 days)
XPOVIO (60 MG ONCE WEEKLY) 20 MG TAB THPK	Tier 2	PA; LA; QL (12 per 28 days)
XPOVIO (60 MG ONCE WEEKLY) 60 MG TAB THPK	Tier 2	PA; LA; QL (4 per 28 days)
XPOVIO (60 MG TWICE WEEKLY)	Tier 2	PA; LA; QL (24 per 28 days)
XPOVIO (80 MG ONCE WEEKLY) 20 MG TAB THPK	Tier 2	PA; LA; QL (16 per 28 days)
XPOVIO (80 MG ONCE WEEKLY) 40 MG TAB THPK	Tier 2	PA; LA; QL (8 per 28 days)
XPOVIO (80 MG TWICE WEEKLY)	Tier 2	PA; LA; QL (32 per 28 days)
XTANDI 40 MG CAP	Tier 2	PA; LA; QL (120 per 30 days)
XTANDI 40 MG TAB	Tier 2	PA; QL (120 per 30 days)

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
XTANDI 80 MG TAB	Tier 2	PA; QL (60 per 30 days)
YEROVY	Tier 2	PA
YONDELIS	Tier 2	B/D PA
YONSA	Tier 2	PA; QL (120 per 30 days)
ZALTRAP	Tier 2	PA; LA
ZANOSAR	Tier 2	B/D PA
ZEJULA	Tier 2	PA; LA; QL (90 per 30 days)
ZELBORAF	Tier 2	PA; LA; QL (240 per 30 days)
ZEPZELCA	Tier 2	
ZOLINZA	Tier 2	PA; QL (120 per 30 days)
ZYDELIG	Tier 2	PA; LA; QL (60 per 30 days)
ZYKADIA	Tier 2	PA; LA; QL (90 per 30 days)
ZYNLONTA	Tier 2	PA
ZYTIGA 500 MG TAB	Tier 2	PA; LA; QL (60 per 30 days)
<b>ANTIPARASITICS</b>		
<i>albendazole</i>	Tier 2	MO
<i>atovaquone</i>	Tier 2	PA; MO
<i>atovaquone-proguanil hcl 250-100 mg tab</i>	Tier 2	MO
<i>chloroquine phosphate</i>	Tier 1	MO
COARTEM	Tier 2	MO
<i>hydroxychloroquine sulfate 200 mg tab</i>	Tier 1	MO
<i>ivermectin 3 mg tab</i>	Tier 2	PA; MO
<i>mefloquine hcl</i>	Tier 2	MO
<i>nitazoxanide</i>	Tier 2	QL (6 per 30 days); MO
<i>pentamidine isethionate</i>	Tier 2	
<i>pentamidine isethionate 300 mg recon soln for nebulization</i>	Tier 2	B/D PA; MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>praziquantel</i>	Tier 2	MO
<i>primaquine phosphate</i>	Tier 2	MO
<i>pyrimethamine</i>	Tier 2	MO
<i>quinine sulfate</i>	Tier 2	PA; MO
<i>reeses pinworm medicine 144 (50 base) mg/ml suspension</i>	Tier 4	[*]
<b>ANTIPARKINSON AGENTS</b>		
<i>amantadine hcl 50 mg/5ml solution, 100 mg cap, 100 mg tab</i>	Tier 2	MO
<i>APOKYN</i>	Tier 2	PA; LA; QL (60 per 30 days)
<i>apomorphine hcl</i>	Tier 2	PA; QL (60 per 30 days)
<i>benztropine mesylate 0.5 mg tab, 1 mg tab, 2 mg tab</i>	Tier 2	PA; MO
<i>bromocriptine mesylate</i>	Tier 2	MO
<i>carbidopa</i>	Tier 2	MO
<i>carbidopa-levodopa</i>	Tier 2	MO
<i>carbidopa-levodopa er</i>	Tier 2	MO
<i>carbidopa-levodopa-entacapone</i>	Tier 2	MO
<i>entacapone</i>	Tier 2	MO
<i>NEUPRO</i>	Tier 2	QL (30 per 30 days); MO
<i>pramipexole dihydrochloride</i>	Tier 2	MO
<i>rasagiline mesylate</i>	Tier 2	MO
<i>ropinirole hcl</i>	Tier 2	MO
<i>RYTARY</i>	Tier 2	ST; MO
<i>selegiline hcl</i>	Tier 2	MO
<i>tolcapone</i>	Tier 2	PA; QL (180 per 30 days); MO
<i>trihexyphenidyl hcl 0.4 mg/ml solution</i>	Tier 2	PA; MO
<i>trihexyphenidyl hcl 2 mg tab, 5 mg tab</i>	Tier 2	MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<b>ANTIPSYCHOTICS</b>		
ABILITY MAINTENA	Tier 2	QL (1 per 28 days); MO
<i>aripiprazole 1 mg/ml solution</i>	Tier 1	QL (900 per 30 days); MO
<i>aripiprazole 10 mg tab disp</i>	Tier 1	QL (90 per 30 days); MO
<i>aripiprazole 15 mg tab disp</i>	Tier 1	QL (60 per 30 days); MO
<i>aripiprazole 2 mg tab, 5 mg tab, 10 mg tab, 15 mg tab</i>	Tier 1	MO
<i>aripiprazole 20 mg tab, 30 mg tab</i>	Tier 1	QL (30 per 30 days); MO
<i>asenapine maleate 10 mg sl tab</i>	Tier 2	QL (60 per 30 days); MO
<i>asenapine maleate 2.5 mg sl tab</i>	Tier 2	QL (240 per 30 days); MO
<i>asenapine maleate 5 mg sl tab</i>	Tier 2	QL (120 per 30 days); MO
CAPLYTA	Tier 2	PA; QL (30 per 30 days); MO
<i>chlorpromazine hcl 10 mg tab, 25 mg tab, 25 mg/ml solution, 50 mg tab, 50 mg/2ml solution, 100 mg tab, 200 mg tab</i>	Tier 2	MO
CHLORPROMAZINE HCL 30 MG/ML CONC, 100 MG/ML CONC	Tier 2	
<i>clozapine 100 mg tab, 100 mg tab disp</i>	Tier 1	QL (270 per 30 days); MO
<i>clozapine 12.5 mg tab disp</i>	Tier 1	QL (2160 per 30 days); MO
<i>clozapine 150 mg tab disp</i>	Tier 1	QL (180 per 30 days); MO
<i>clozapine 200 mg tab, 200 mg tab disp</i>	Tier 1	QL (120 per 30 days); MO
<i>clozapine 25 mg tab, 25 mg tab disp</i>	Tier 1	QL (1080 per 30 days); MO
<i>clozapine 50 mg tab</i>	Tier 1	QL (540 per 30 days); MO
FANAPT 1 MG TAB	Tier 2	QL (720 per 30 days); MO
FANAPT 10 MG TAB, 12 MG TAB	Tier 2	QL (60 per 30 days); MO
FANAPT 2 MG TAB	Tier 2	QL (360 per 30 days); MO
FANAPT 4 MG TAB	Tier 2	QL (180 per 30 days); MO
FANAPT 6 MG TAB	Tier 2	QL (120 per 30 days); MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
FANAPT 8 MG TAB	Tier 2	QL (90 per 30 days); MO
FANAPT TITRATION PACK	Tier 2	MO
<i>fluphenazine decanoate</i>	Tier 1	MO
<i>fluphenazine hcl 1 mg tab, 2.5 mg tab, 2.5 mg/5ml elixir, 2.5 mg/ml solution, 5 mg tab, 5 mg/ml conc, 10 mg tab</i>	Tier 1	MO
<i>haloperidol</i>	Tier 1	MO
<i>haloperidol decanoate</i>	Tier 1	MO
<i>haloperidol lactate</i>	Tier 1	MO
INVEGA HAFYERA 1092 MG/3.5ML SUSP PRSYR	Tier 2	QL (3.5 per 180 over time); NEDS
INVEGA HAFYERA 1560 MG/5ML SUSP PRSYR	Tier 2	QL (5 per 180 over time); NEDS
INVEGA SUSTENNA 117 MG/0.75ML SUSP PRSYR	Tier 2	QL (0.75 per 28 days); MO
INVEGA SUSTENNA 156 MG/ML SUSP PRSYR	Tier 2	QL (1 per 28 days); MO
INVEGA SUSTENNA 234 MG/1.5ML SUSP PRSYR	Tier 2	QL (1.5 per 28 days); MO
INVEGA SUSTENNA 39 MG/0.25ML SUSP PRSYR	Tier 2	QL (0.25 per 28 days); MO
INVEGA SUSTENNA 78 MG/0.5ML SUSP PRSYR	Tier 2	QL (0.5 per 28 days); MO
INVEGA TRINZA 273 MG/0.88ML SUSP PRSYR	Tier 2	QL (0.875 per 84 days); MO; NEDS
INVEGA TRINZA 410 MG/1.32ML SUSP PRSYR	Tier 2	QL (1.315 per 84 days); MO; NEDS
INVEGA TRINZA 546 MG/1.75ML SUSP PRSYR	Tier 2	QL (1.75 per 84 days); MO; NEDS
INVEGA TRINZA 819 MG/2.63ML SUSP PRSYR	Tier 2	QL (2.625 per 84 days); MO; NEDS
<i>loxapine succinate</i>	Tier 2	MO
<i>molindone hcl</i>	Tier 2	MO
NUPLAZID	Tier 2	PA; LA; QL (30 per 30 days)
<i>olanzapine 10 mg recon soln</i>	Tier 1	QL (90 per 30 days); MO
<i>olanzapine 2.5 mg tab, 5 mg tab, 5 mg tab disp, 7.5 mg tab, 10 mg tab, 10 mg tab disp, 15 mg tab, 15 mg tab disp</i>	Tier 1	MO
<i>olanzapine 20 mg tab, 20 mg tab disp</i>	Tier 1	QL (30 per 30 days); MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>paliperidone er 1.5 mg tab er 24h, 3 mg tab er 24h, 9 mg tab er 24h</i>	Tier 1	QL (30 per 30 days); MO
<i>paliperidone er 6 mg tab er 24h</i>	Tier 1	QL (60 per 30 days); MO
<i>PERSERIS 120 MG PRSYR</i>	Tier 2	QL (1 per 28 days)
<i>PERSERIS 90 MG PRSYR</i>	Tier 2	QL (1 per 28 days); MO
<i>pimozide</i>	Tier 2	MO
<i>quetiapine fumarate 100 mg tab</i>	Tier 1	QL (240 per 30 days); MO
<i>quetiapine fumarate 150 mg tab</i>	Tier 1	QL (90 per 30 days); MO
<i>quetiapine fumarate 200 mg tab</i>	Tier 1	QL (120 per 30 days); MO
<i>quetiapine fumarate 25 mg tab</i>	Tier 1	QL (960 per 30 days); MO
<i>quetiapine fumarate 300 mg tab</i>	Tier 1	QL (80 per 30 days); MO
<i>quetiapine fumarate 400 mg tab</i>	Tier 1	QL (60 per 30 days); MO
<i>quetiapine fumarate 50 mg tab</i>	Tier 1	QL (480 per 30 days); MO
<i>quetiapine fumarate er 150 mg tab er 24h, 200 mg tab er 24h</i>	Tier 2	QL (30 per 30 days); MO
<i>quetiapine fumarate er 50 mg tab er 24h, 300 mg tab er 24h, 400 mg tab er 24h</i>	Tier 2	QL (60 per 30 days); MO
<i>REXULTI 0.25 MG TAB, 0.5 MG TAB, 1 MG TAB, 2 MG TAB</i>	Tier 2	QL (60 per 30 days); MO
<i>REXULTI 3 MG TAB, 4 MG TAB</i>	Tier 2	QL (30 per 30 days); MO
<i>RISPERDAL CONSTA</i>	Tier 2	QL (2 per 28 days); MO
<i>risperidone 0.25 mg tab, 0.25 mg tab disp</i>	Tier 1	QL (1920 per 30 days); MO
<i>risperidone 0.5 mg tab, 0.5 mg tab disp</i>	Tier 1	QL (960 per 30 days); MO
<i>risperidone 1 mg tab, 1 mg tab disp, 1 mg/ml solution</i>	Tier 1	QL (480 per 30 days); MO
<i>risperidone 2 mg tab, 2 mg tab disp</i>	Tier 1	QL (240 per 30 days); MO
<i>risperidone 3 mg tab disp</i>	Tier 1	QL (150 per 30 days); MO
<i>risperidone 3 mg tab, 4 mg tab, 4 mg tab disp</i>	Tier 1	QL (120 per 30 days); MO
<i>SECUADO</i>	Tier 2	QL (30 per 30 days); MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>thioridazine hcl</i>	Tier 1	MO
<i>thiothixene</i>	Tier 1	MO
<i>trifluoperazine hcl</i>	Tier 1	MO
VERSACLOZ	Tier 2	QL (600 per 30 days); MO
VRAYLAR 1.5 & 3 MG CAP THPK	Tier 2	MO
VRAYLAR 1.5 MG CAP, 3 MG CAP, 4.5 MG CAP, 6 MG CAP	Tier 2	QL (30 per 30 days); MO
<i>ziprasidone hcl 20 mg cap</i>	Tier 1	QL (240 per 30 days); MO
<i>ziprasidone hcl 40 mg cap</i>	Tier 1	QL (120 per 30 days); MO
<i>ziprasidone hcl 60 mg cap, 80 mg cap</i>	Tier 1	QL (60 per 30 days); MO
<i>ziprasidone mesylate</i>	Tier 2	QL (6 per 3 days); MO
ZYPREXA RELPREVV	Tier 2	QL (2 per 28 days)
<b>ANTISPASTICITY AGENTS</b>		
<i>baclofen 20 mg tab</i>	Tier 2	QL (120 per 30 days); MO
<i>baclofen 5 mg tab, 10 mg tab</i>	Tier 2	QL (90 per 30 days); MO
<i>dantrolene sodium</i>	Tier 2	MO
<i>tizanidine hcl 2 mg tab, 4 mg tab</i>	Tier 2	MO
<b>ANTIVIRALS</b>		
<i>abacavir sulfate 20 mg/ml solution</i>	Tier 2	QL (960 per 30 days)
<i>abacavir sulfate 300 mg tab</i>	Tier 2	QL (60 per 30 days)
<i>abacavir sulfate-lamivudine</i>	Tier 2	QL (30 per 30 days)
<i>abacavir-lamivudine-zidovudine</i>	Tier 2	QL (60 per 30 days)
<i>acyclovir 200 mg cap, 200 mg/5ml suspension, 400 mg tab, 800 mg tab</i>	Tier 2	MO
<i>acyclovir sodium</i>	Tier 2	B/D PA; MO
<i>adefovir dipivoxil</i>	Tier 2	PA
APTIVUS	Tier 2	QL (120 per 30 days)

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
atazanavir sulfate 150 mg cap, 200 mg cap	Tier 2	QL (60 per 30 days)
atazanavir sulfate 300 mg cap	Tier 2	QL (30 per 30 days)
BARACLUDE 0.05 MG/ML SOLUTION	Tier 2	PA
BIKTARVY	Tier 2	QL (30 per 30 days)
CABENUVA 400 & 600 MG/2ML SUSP	Tier 2	QL (4 per 28 days); MO
CABENUVA 600 & 900 MG/3ML SUSP	Tier 2	QL (6 per 28 days); MO
CIMDUO	Tier 2	QL (30 per 30 days)
COMPLERA	Tier 2	QL (30 per 30 days)
CRIXIVAN 200 MG CAP	Tier 2	QL (360 per 30 days)
CRIXIVAN 400 MG CAP	Tier 2	QL (180 per 30 days)
DELSTRIGO	Tier 2	QL (30 per 30 days)
DESCOVY	Tier 2	QL (30 per 30 days)
<i>docosanol 10 % cream</i>	Tier 4	[*]
DOVATO	Tier 2	QL (30 per 30 days)
EDURANT	Tier 2	QL (30 per 30 days)
efavirenz 200 mg cap	Tier 2	QL (120 per 30 days)
efavirenz 50 mg cap	Tier 2	QL (360 per 30 days)
efavirenz 600 mg tab	Tier 2	QL (30 per 30 days)
efavirenz-emtricitab-tenofovir	Tier 2	QL (30 per 30 days)
efavirenz-lamivudine-tenofovir	Tier 2	QL (30 per 30 days)
emtricitabine	Tier 2	QL (30 per 30 days)
emtricitabine-tenofovir df	Tier 2	QL (30 per 30 days)
EMTRIVA 10 MG/ML SOLUTION	Tier 2	QL (850 per 30 days)
entecavir	Tier 2	PA
EPCLUSA 150-37.5 MG PACKET, 400-100 MG TAB	Tier 2	PA; QL (30 per 30 days)
EPCLUSA 200-50 MG PACKET, 200-50 MG TAB	Tier 2	PA; QL (60 per 30 days)
EPIVIR HBV 5 MG/ML SOLUTION	Tier 2	

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>etravirine 100 mg tab</i>	Tier 2	QL (120 per 30 days)
<i>etravirine 200 mg tab</i>	Tier 2	QL (60 per 30 days)
<i>EVOTAZ</i>	Tier 2	QL (30 per 30 days)
<i>famciclovir 125 mg tab, 250 mg tab</i>	Tier 2	QL (60 per 30 days); MO
<i>famciclovir 500 mg tab</i>	Tier 2	QL (21 per 7 days); MO
<i>fosamprenavir calcium</i>	Tier 2	QL (120 per 30 days)
<i>FUZEON</i>	Tier 2	QL (60 per 30 days)
<i>ganciclovir sodium 500 mg recon soln</i>	Tier 2	B/D PA
<i>GENVOYA</i>	Tier 2	QL (30 per 30 days)
<i>HARVONI</i>	Tier 2	PA; QL (28 per 28 days)
<i>INTELENCE 100 MG TAB</i>	Tier 2	QL (120 per 30 days)
<i>INTELENCE 200 MG TAB</i>	Tier 2	QL (60 per 30 days)
<i>INTELENCE 25 MG TAB</i>	Tier 2	QL (480 per 30 days)
<i>INVIRASE 500 MG TAB</i>	Tier 2	QL (120 per 30 days)
<i>ISENTRESS 100 MG CHEW TAB, 100 MG PACKET</i>	Tier 2	QL (180 per 30 days)
<i>ISENTRESS 25 MG CHEW TAB</i>	Tier 2	QL (720 per 30 days)
<i>ISENTRESS 400 MG TAB</i>	Tier 2	QL (120 per 30 days)
<i>ISENTRESS HD</i>	Tier 2	QL (60 per 30 days)
<i>JULUCA</i>	Tier 2	QL (30 per 30 days)
<i>KALETRA 100-25 MG TAB</i>	Tier 2	QL (300 per 30 days)
<i>KALETRA 200-50 MG TAB</i>	Tier 2	QL (120 per 30 days)
<i>lamivudine 10 mg/ml solution</i>	Tier 2	QL (960 per 30 days)
<i>lamivudine 100 mg tab</i>	Tier 2	
<i>lamivudine 150 mg tab</i>	Tier 2	QL (60 per 30 days)
<i>lamivudine 300 mg tab</i>	Tier 2	QL (30 per 30 days)
<i>lamivudine-zidovudine</i>	Tier 2	QL (60 per 30 days)
<i>LEXIVA 50 MG/ML SUSPENSION</i>	Tier 2	QL (1800 per 30 days)

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>lopinavir-ritonavir 100-25 mg tab</i>	Tier 2	QL (300 per 30 days)
<i>lopinavir-ritonavir 200-50 mg tab</i>	Tier 2	QL (120 per 30 days)
<i>lopinavir-ritonavir 400-100 mg/5ml solution</i>	Tier 2	QL (480 per 30 days)
<i>maraviroc</i>	Tier 2	QL (120 per 30 days)
<i>nevirapine 200 mg tab</i>	Tier 2	QL (60 per 30 days)
<i>nevirapine 50 mg/5ml suspension</i>	Tier 2	QL (1200 per 30 days)
<i>nevirapine er 100 mg tab er 24h</i>	Tier 2	QL (90 per 30 days)
<i>nevirapine er 400 mg tab er 24h</i>	Tier 2	QL (30 per 30 days)
<b>NORVIR 100 MG PACKET</b>	Tier 2	QL (360 per 30 days)
<b>NORVIR 80 MG/ML SOLUTION</b>	Tier 2	QL (480 per 30 days)
<b>ODEFSEY</b>	Tier 2	QL (30 per 30 days)
<i>oseltamivir phosphate 6 mg/ml recon susp, 30 mg cap, 45 mg cap, 75 mg cap</i>	Tier 2	
<b>PIFELTRO</b>	Tier 2	QL (30 per 30 days)
<b>PREVYMIS 240 MG TAB, 480 MG TAB</b>	Tier 2	
<b>PREZCOBIX</b>	Tier 2	QL (30 per 30 days)
<b>PREZISTA 100 MG/ML SUSPENSION</b>	Tier 2	QL (400 per 30 days)
<b>PREZISTA 150 MG TAB</b>	Tier 2	QL (180 per 30 days)
<b>PREZISTA 600 MG TAB, 800 MG TAB</b>	Tier 2	QL (60 per 30 days)
<b>PREZISTA 75 MG TAB</b>	Tier 2	QL (300 per 30 days)
<b>RELENZA DISKHALER</b>	Tier 2	QL (60 per 180 over time); MO; NEDS
<b>RETROVIR 10 MG/ML SOLUTION</b>	Tier 2	
<b>REYATAZ 50 MG PACKET</b>	Tier 2	QL (240 per 30 days)
<i>ribavirin</i>	Tier 2	
<i>rimantadine hcl</i>	Tier 2	MO
<i>ritonavir</i>	Tier 2	QL (360 per 30 days)
<b>RUKOBIA</b>	Tier 2	QL (60 per 30 days); MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
SELZENTRY 20 MG/ML SOLUTION	Tier 2	QL (1840 per 30 days)
SELZENTRY 25 MG TAB, 150 MG TAB, 300 MG TAB	Tier 2	QL (120 per 30 days)
SELZENTRY 75 MG TAB	Tier 2	QL (60 per 30 days)
SOFOSBUVIR-VELPATASVIR	Tier 2	PA; QL (30 per 30 days)
<i>stavudine 15 mg cap, 20 mg cap</i>	Tier 2	QL (120 per 30 days)
<i>stavudine 30 mg cap, 40 mg cap</i>	Tier 2	QL (60 per 30 days)
STRIBILD	Tier 2	QL (30 per 30 days)
SYMTUZA	Tier 2	QL (30 per 30 days)
TEMIXYS	Tier 2	QL (30 per 30 days)
<i>tenofovir disoproxil fumarate</i>	Tier 2	QL (30 per 30 days)
TIVICAY 10 MG TAB	Tier 2	QL (120 per 30 days)
TIVICAY 25 MG TAB, 50 MG TAB	Tier 2	QL (60 per 30 days)
TIVICAY PD	Tier 2	QL (360 per 30 days)
<i>trifluridine</i>	Tier 2	MO
TRIUMEQ	Tier 2	QL (30 per 30 days)
TRIUMEQ PD	Tier 2	QL (180 per 30 days)
TRIZIVIR	Tier 2	QL (60 per 30 days)
TROGARZO	Tier 2	PA; LA; QL (23.94 per 28 days)
TRUVADA 100-150 MG TAB, 133-200 MG TAB, 167-250 MG TAB	Tier 2	QL (30 per 30 days)
TYBOST	Tier 2	QL (30 per 30 days)
<i>valacyclovir hcl 1 gm tab</i>	Tier 2	QL (90 per 30 days); MO
<i>valacyclovir hcl 500 mg tab</i>	Tier 2	QL (60 per 30 days); MO
<i>valganciclovir hcl 450 mg tab</i>	Tier 2	
VEMLIDY	Tier 2	PA; QL (30 per 30 days)
VIRACEPT 250 MG TAB	Tier 2	QL (300 per 30 days)
VIRACEPT 625 MG TAB	Tier 2	QL (120 per 30 days)

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
VIREAD 150 MG TAB, 200 MG TAB, 250 MG TAB	Tier 2	QL (30 per 30 days)
VIREAD 40 MG/GM POWDER	Tier 2	QL (240 per 30 days)
VOSEVI	Tier 2	PA; QL (30 per 30 days)
XOFLUZA (40 MG DOSE)	Tier 2	
XOFLUZA (80 MG DOSE)	Tier 2	
<i>zidovudine 100 mg cap</i>	Tier 2	QL (180 per 30 days)
<i>zidovudine 300 mg tab</i>	Tier 2	QL (60 per 30 days)
<i>zidovudine 50 mg/5ml syrup</i>	Tier 2	QL (1920 per 30 days)
ZIRGAN	Tier 2	MO
<b>ANXIOLYTICS</b>		
<i>alprazolam 0.25 mg tab, 0.5 mg tab, 1 mg tab, 2 mg tab</i>	Tier 2	QL (120 per 30 days); MO
<i>buspirone hcl</i>	Tier 2	MO
<i>clonazepam 0.125 mg tab disp</i>	Tier 2	QL (4800 per 30 days); MO
<i>clonazepam 0.25 mg tab disp</i>	Tier 2	QL (2400 per 30 days); MO
<i>clonazepam 0.5 mg tab, 0.5 mg tab disp</i>	Tier 2	QL (1200 per 30 days); MO
<i>clonazepam 1 mg tab, 1 mg tab disp</i>	Tier 2	QL (600 per 30 days); MO
<i>clonazepam 2 mg tab, 2 mg tab disp</i>	Tier 2	QL (300 per 30 days); MO
<i>clorazepate dipotassium</i>	Tier 2	MO
<i>diazepam 10 mg tab</i>	Tier 2	QL (120 per 30 days); MO
<i>diazepam 2 mg tab</i>	Tier 2	QL (600 per 30 days); MO
<i>diazepam 5 mg tab, 5 mg/ml conc</i>	Tier 2	QL (240 per 30 days); MO
<i>diazepam 5 mg/5ml solution</i>	Tier 2	QL (1200 per 30 days); MO
<i>diazepam 5 mg/ml solution</i>	Tier 2	MO
<i>diazepam intensol</i>	Tier 2	QL (240 per 30 days); MO
<i>hydroxyzine pamoate 25 mg cap, 50 mg cap</i>	Tier 2	MO
<i>lorazepam 0.5 mg tab, 1 mg tab</i>	Tier 2	QL (90 per 30 days); MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>lorazepam 1 mg/0.5ml conc, 2 mg tab, 2 mg/ml conc</i>	Tier 2	QL (150 per 30 days); MO
<i>lorazepam intensol</i>	Tier 2	QL (150 per 30 days); MO
<b>BIPOLAR AGENTS</b>		
LATUDA 20 MG TAB, 40 MG TAB, 60 MG TAB, 120 MG TAB	Tier 2	QL (30 per 30 days); MO
LATUDA 80 MG TAB	Tier 2	QL (60 per 30 days); MO
LITHIUM	Tier 2	MO
<i>lithium carbonate</i>	Tier 1	MO
<i>lithium carbonate er</i>	Tier 1	MO
<b>BLOOD GLUCOSE REGULATORS</b>		
<i>acarbose</i>	Tier 1	QL (90 per 30 days); MO
BYDUREON	Tier 2	QL (4 per 28 days); MO
BYDUREON BCISE	Tier 2	QL (4 per 28 days); MO
BYETTA 10 MCG PEN	Tier 2	QL (2.4 per 30 days); MO
BYETTA 5 MCG PEN	Tier 2	QL (1.2 per 30 days); MO
CYCLOSET	Tier 2	ST; QL (180 per 30 days); MO
DEX4 4-6 GM-MG CHEW TAB	Tier 4	[*]
DEX4 GLUCOSE 4-6 GM-MG CHEW TAB, 15 GM/ 59ML LIQUID	Tier 4	[*]
DEX4 GLUCOSE GO-POUCH 15 GM/33GM GEL	Tier 4	[*]
<i>diazoxide</i>	Tier 2	MO
FARXIGA	Tier 2	QL (30 per 30 days); MO
<i>glimepiride 1 mg tab</i>	Tier 1	QL (240 per 30 days); MO
<i>glimepiride 2 mg tab</i>	Tier 1	QL (120 per 30 days); MO
<i>glimepiride 4 mg tab</i>	Tier 1	QL (60 per 30 days); MO
<i>glipizide 10 mg tab</i>	Tier 1	QL (120 per 30 days); MO
<i>glipizide 5 mg tab</i>	Tier 1	QL (240 per 30 days); MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
glipizide er 10 mg tab er 24h	Tier 1	QL (60 per 30 days); MO
glipizide er 2.5 mg tab er 24h	Tier 1	QL (240 per 30 days); MO
glipizide er 5 mg tab er 24h	Tier 1	QL (120 per 30 days); MO
glipizide xl 10 mg tab er 24h	Tier 1	QL (60 per 30 days); MO
glipizide xl 2.5 mg tab er 24h	Tier 1	QL (240 per 30 days); MO
glipizide xl 5 mg tab er 24h	Tier 1	QL (120 per 30 days); MO
glipizide-metformin hcl 2.5-250 mg tab	Tier 1	QL (240 per 30 days); MO
glipizide-metformin hcl 2.5-500 mg tab, 5-500 mg tab	Tier 1	QL (120 per 30 days); MO
GLUCAGEN HYPOKIT	Tier 1	MO
GLUCAGON EMERGENCY 1 MG KIT	Tier 1	MO
gluco burst 40 % gel	Tier 4	[*]
GLUCOSE 4 GM CHEW TAB, 4-6 GM-MG CHEW TAB	Tier 4	[*]
GLUCOSE INSTANT ENERGY 4-6 GM-MG CHEW TAB, 6-4 MG-GM CHEW TAB	Tier 4	[*]
glyburide 1.25 mg tab	Tier 2	QL (480 per 30 days); MO
glyburide 2.5 mg tab	Tier 2	QL (240 per 30 days); MO
glyburide 5 mg tab	Tier 2	QL (120 per 30 days); MO
GLYXAMBI	Tier 2	QL (30 per 30 days); MO
GNP GLUCOSE 4 GM CHEW TAB, 4-6 GM-MG CHEW TAB	Tier 4	[*]
GOODSENSE GLUCOSE 4-6 GM-MG CHEW TAB	Tier 4	[*]
HUMALOG	Tier 1	MO
HUMALOG JUNIOR KWIKPEN	Tier 1	MO
HUMALOG KWIKPEN	Tier 1	MO
HUMALOG MIX 50/50	Tier 1	MO
HUMALOG MIX 50/50 KWIKPEN	Tier 1	MO
HUMALOG MIX 75/25	Tier 1	MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
HUMALOG MIX 75/25 KWIKPEN	Tier 1	MO
HUMULIN 70/30	Tier 1	MO
HUMULIN 70/30 KWIKPEN	Tier 1	MO
HUMULIN N	Tier 1	MO
HUMULIN N KWIKPEN	Tier 1	MO
HUMULIN R	Tier 1	MO
HUMULIN R U-500 (CONCENTRATED)	Tier 1	PA; MO
HUMULIN R U-500 KWIKPEN	Tier 1	PA; MO
INSULIN LISPRO	Tier 1	MO
INSULIN LISPRO (1 UNIT DIAL)	Tier 1	MO
INSULIN LISPRO JUNIOR KWIKPEN	Tier 1	MO
INSULIN LISPRO PROT & LISPRO	Tier 1	MO
INVOKAMET	Tier 2	QL (60 per 30 days); MO
INVOKAMET XR	Tier 2	QL (60 per 30 days); MO
INVOKANA 100 MG TAB	Tier 2	QL (90 per 30 days); MO
INVOKANA 300 MG TAB	Tier 2	QL (30 per 30 days); MO
JANUMET	Tier 2	QL (60 per 30 days); MO
JANUMET XR 100-1000 MG TAB ER 24H	Tier 2	QL (30 per 30 days); MO
JANUMET XR 50-1000 MG TAB ER 24H, 50-500 MG TAB ER 24H	Tier 2	QL (60 per 30 days); MO
JANUVIA 100 MG TAB	Tier 2	QL (30 per 30 days); MO
JANUVIA 25 MG TAB	Tier 2	QL (120 per 30 days); MO
JANUVIA 50 MG TAB	Tier 2	QL (60 per 30 days); MO
JARDIANCE	Tier 2	QL (30 per 30 days); MO
JENTADUETO	Tier 2	QL (60 per 30 days); MO
JENTADUETO XR 2.5-1000 MG TAB ER 24H	Tier 2	QL (60 per 30 days); MO
JENTADUETO XR 5-1000 MG TAB ER 24H	Tier 2	QL (30 per 30 days); MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
KROGER GLUCOSE 4-6 GM-MG CHEW TAB	Tier 4	[*]
LANTUS	Tier 1	MO
LANTUS SOLOSTAR	Tier 1	MO
LEVEMIR	Tier 1	MO
LEVEMIR FLEXTOUCH	Tier 1	MO
LONGS GLUCOSE 4-6 GM-MG CHEW TAB	Tier 4	[*]
LYUMJEV	Tier 1	MO
LYUMJEV KWIKPEN	Tier 1	MO
<i>metformin hcl 1000 mg tab</i>	Tier 1	QL (60 per 30 days); MO
<i>metformin hcl 500 mg tab</i>	Tier 1	QL (150 per 30 days); MO
<i>metformin hcl 850 mg tab</i>	Tier 1	QL (90 per 30 days); MO
<i>metformin hcl er 500 mg tab er 24h</i>	Tier 1	QL (120 per 30 days); MO
<i>metformin hcl er 750 mg tab er 24h</i>	Tier 1	QL (60 per 30 days); MO
<i>nateglinide 120 mg tab</i>	Tier 1	QL (90 per 30 days); MO
<i>nateglinide 60 mg tab</i>	Tier 1	QL (180 per 30 days); MO
OZEMPIC (0.25 OR 0.5 MG/DOSE)	Tier 2	MO
OZEMPIC (1 MG/DOSE)	Tier 2	MO
OZEMPIC (2 MG/DOSE)	Tier 2	MO
<i>pioglitazone hcl 15 mg tab</i>	Tier 1	QL (90 per 30 days); MO
<i>pioglitazone hcl 30 mg tab</i>	Tier 1	QL (45 per 30 days); MO
<i>pioglitazone hcl 45 mg tab</i>	Tier 1	QL (30 per 30 days); MO
RELION GLUCOSE 4-6 GM-MG CHEW TAB	Tier 4	[*]
<i>repaglinide 0.5 mg tab</i>	Tier 1	QL (960 per 30 days); MO
<i>repaglinide 1 mg tab</i>	Tier 1	QL (480 per 30 days); MO
<i>repaglinide 2 mg tab</i>	Tier 1	QL (240 per 30 days); MO
RYBELSUS 3 MG TAB	Tier 2	QL (30 per 180 over time); MO; NEDS
RYBELSUS 7 MG TAB, 14 MG TAB	Tier 2	QL (30 per 30 days); MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
SEMGLEE	Tier 2	MO
SM GLUCOSE 4-6 GM-MG CHEW TAB	Tier 4	[*]
SMART SENSE GLUCOSE 4-6 GM-MG CHEW TAB	Tier 4	[*]
SYMLINPEN 120	Tier 2	PA; QL (11 per 30 days); MO
SYMLINPEN 60	Tier 2	PA; QL (6 per 30 days); MO
SYNJARDY	Tier 2	QL (60 per 30 days); MO
SYNJARDY XR 25-1000 MG TAB ER 24H	Tier 2	QL (30 per 30 days); MO
SYNJARDY XR 5-1000 MG TAB ER 24H, 10-1000 MG TAB ER 24H, 12.5-1000 MG TAB ER 24H	Tier 2	QL (60 per 30 days); MO
TGT GLUCOSE 4-6 GM-MG CHEW TAB	Tier 4	[*]
TOUJEO MAX SOLOSTAR	Tier 2	MO
TOUJEO SOLOSTAR	Tier 2	MO
TRADJENTA	Tier 2	QL (30 per 30 days); MO
TRULICITY	Tier 2	QL (2 per 28 days); MO
UP & UP GLUCOSE 4-6 GM-MG CHEW TAB	Tier 4	[*]
VICTOZA	Tier 2	QL (9 per 30 days); MO
XIGDUO XR 2.5-1000 MG TAB ER 24H, 5-1000 MG TAB ER 24H	Tier 2	QL (60 per 30 days); MO
XIGDUO XR 5-500 MG TAB ER 24H, 10-1000 MG TAB ER 24H, 10-500 MG TAB ER 24H	Tier 2	QL (30 per 30 days); MO

## BLOOD PRODUCTS AND MODIFIERS

<i>anagrelide hcl</i>	Tier 2	MO
<i>aspirin-dipyridamole er</i>	Tier 2	ST; QL (60 per 30 days); MO
<i>BRILINTA</i>	Tier 2	QL (60 per 30 days); MO
<i>cilostazol</i>	Tier 2	MO
<i>clopidogrel bisulfate 300 mg tab</i>	Tier 1	QL (1 per 30 days); MO
<i>clopidogrel bisulfate 75 mg tab</i>	Tier 1	QL (30 per 30 days); MO
<i>dabigatran etexilate mesylate</i>	Tier 2	QL (60 per 30 days); MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
ELIQUIS	Tier 2	QL (60 per 30 days); MO
ELIQUIS DVT/PE STARTER PACK	Tier 2	QL (74 per 180 over time); MO; NEDS
<i>enoxaparin sodium 100 mg/ml soln prsyr, 150 mg/ml soln prsyr</i>	Tier 2	QL (56 per 28 days); MO
<i>enoxaparin sodium 30 mg/0.3ml soln prsyr</i>	Tier 2	QL (16.8 per 28 days); MO
<i>enoxaparin sodium 300 mg/3ml solution</i>	Tier 2	QL (168 per 28 days); MO
<i>enoxaparin sodium 40 mg/0.4ml soln prsyr</i>	Tier 2	QL (22.4 per 28 days); MO
<i>enoxaparin sodium 60 mg/0.6ml soln prsyr</i>	Tier 2	QL (33.6 per 28 days); MO
<i>enoxaparin sodium 80 mg/0.8ml soln prsyr, 120 mg/0.8ml soln prsyr</i>	Tier 2	QL (44.8 per 28 days); MO
<i>fondaparinux sodium 10 mg/0.8ml solution</i>	Tier 2	QL (24 per 30 days); MO
<i>fondaparinux sodium 2.5 mg/0.5ml solution</i>	Tier 2	QL (15 per 30 days); MO
<i>fondaparinux sodium 5 mg/0.4ml solution</i>	Tier 2	QL (12 per 30 days); MO
<i>fondaparinux sodium 7.5 mg/0.6ml solution</i>	Tier 2	QL (18 per 30 days); MO
FULPHILA	Tier 2	PA; QL (1.2 per 28 days)
HEPARIN (PORCINE) IN NACL 12500-0.45 UT/250ML-% SOLUTION, 25000-0.45 UT/500ML-% SOLUTION	Tier 2	B/D PA; MO
HEPARIN (PORCINE) IN NACL 25000-0.45 UT/250ML-% SOLUTION	Tier 2	MO
HEPARIN SOD (PORCINE) IN D5W	Tier 2	MO
<i>heparin sodium (porcine) 1000 unit/ml solution, 5000 unit/ml solution, 10000 unit/ml solution, 20000 unit/ml solution</i>	Tier 2	B/D PA; MO
jantoven	Tier 1	MO
MEPHYTON 5 MG TAB	Tier 3	[*]
MOZOBIL	Tier 2	PA
NEULASTA	Tier 2	PA; QL (1.2 per 28 days)
NEULASTA ONPRO	Tier 2	PA; QL (1.2 per 28 days)

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
PRADAXA	Tier 2	QL (60 per 30 days); MO
<i>prasugrel hcl</i>	Tier 2	QL (30 per 30 days); MO
PROCRIT	Tier 2	PA
PROMACTA 12.5 MG PACKET	Tier 2	PA; LA; QL (360 per 30 days)
PROMACTA 12.5 MG TAB, 25 MG TAB	Tier 2	PA; LA; QL (30 per 30 days)
PROMACTA 25 MG PACKET	Tier 2	PA; LA; QL (180 per 30 days)
PROMACTA 50 MG TAB	Tier 2	PA; LA; QL (90 per 30 days)
PROMACTA 75 MG TAB	Tier 2	PA; LA; QL (60 per 30 days)
<i>tranexamic acid 650 mg tab, 1000 mg/10ml solution</i>	Tier 2	MO
<i>warfarin sodium</i>	Tier 1	MO
XARELTO 10 MG TAB, 20 MG TAB	Tier 2	QL (30 per 30 days); MO
XARELTO 2.5 MG TAB, 15 MG TAB	Tier 2	QL (60 per 30 days); MO
XARELTO STARTER PACK	Tier 2	MO
ZARXIO	Tier 2	PA

## CARDIOVASCULAR AGENTS

<i>acebutolol hcl</i>	Tier 1	MO
<i>acetazolamide</i>	Tier 2	MO
<i>acetazolamide sodium</i>	Tier 2	MO
<i>afeditab cr 60 mg tab er 24h</i>	Tier 1	MO
<i>aliskiren fumarate</i>	Tier 2	MO
<i>amiloride hcl</i>	Tier 2	MO
<i>amiloride-hydrochlorothiazide</i>	Tier 2	MO
<i>amiodarone hcl 100 mg tab, 200 mg tab, 400 mg tab</i>	Tier 2	MO
<i>amiodarone hcl 150 mg/3ml solution, 450 mg/9ml solution, 900 mg/18ml solution</i>	Tier 2	B/D PA; MO
<i>amlodipine besy-benazepril hcl</i>	Tier 1	MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>amlodipine besylate</i>	Tier 1	MO
<i>amlodipine besylate-valsartan</i>	Tier 2	MO
<i>amlodipine-olmesartan</i>	Tier 2	MO
<i>amlodipine-valsartan-hctz</i>	Tier 2	MO
<i>atenolol</i>	Tier 1	MO
<i>atenolol-chlorthalidone</i>	Tier 1	MO
<i>atorvastatin calcium</i>	Tier 1	MO
<i>benazepril hcl</i>	Tier 1	MO
<i>benazepril-hydrochlorothiazide</i>	Tier 1	MO
<i>betaxolol hcl 10 mg tab, 20 mg tab</i>	Tier 1	MO
<i>bisoprolol fumarate</i>	Tier 1	MO
<i>bisoprolol-hydrochlorothiazide</i>	Tier 1	MO
<i>bumetanide 0.25 mg/ml solution, 0.5 mg tab, 1 mg tab, 2 mg tab</i>	Tier 2	MO
<i>candesartan cilexetil</i>	Tier 1	MO
<i>candesartan cilexetil-hctz</i>	Tier 1	MO
<i>cartia xt</i>	Tier 1	MO
<i>carvedilol</i>	Tier 1	MO
<i>chlorthalidone</i>	Tier 2	MO
<i>cholestyramine 4 gm packet, 4 gm/dose powder</i>	Tier 2	MO
<i>cholestyramine light 4 gm packet, 4 gm/dose powder</i>	Tier 2	MO
<i>clonidine</i>	Tier 2	QL (4 per 28 days); MO
<i>clonidine hcl</i>	Tier 2	MO
<i>colestipol hcl 1 gm tab, 5 gm granules, 5 gm packet</i>	Tier 2	MO
<i>CORLANOR 5 MG TAB, 7.5 MG TAB</i>	Tier 2	PA; QL (60 per 30 days); MO
<i>CORLANOR 5 MG/5ML SOLUTION</i>	Tier 2	PA; QL (560 per 28 days); MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>digitek 125 mcg tab</i>	Tier 2	MO
<i>digitek 250 mcg tab</i>	Tier 2	PA; MO
<i>digox 125 mcg tab</i>	Tier 2	MO
<i>digox 250 mcg tab</i>	Tier 2	PA; MO
<i>digoxin 0.05 mg/ml solution, 62.5 mcg tab, 125 mcg tab</i>	Tier 2	MO
<i>digoxin 250 mcg tab</i>	Tier 2	PA; MO
<i>dilt-xr</i>	Tier 1	MO
<i>diltiazem hcl 30 mg tab, 60 mg tab, 90 mg tab, 120 mg tab</i>	Tier 1	MO
<i>diltiazem hcl er</i>	Tier 1	MO
<i>diltiazem hcl er beads 120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h, 360 mg cap er 24h</i>	Tier 1	MO
<i>diltiazem hcl er coated beads 120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h</i>	Tier 1	MO
<i>diltiazem hcl er coated beads 360 mg cap er 24h</i>	Tier 2	MO
<i>dofetilide</i>	Tier 2	
<i>doxazosin mesylate</i>	Tier 1	MO
<i>droxidopa 100 mg cap</i>	Tier 2	PA; QL (90 per 30 days)
<i>droxidopa 200 mg cap, 300 mg cap</i>	Tier 2	PA; QL (180 per 30 days)
<i>enalapril maleate 2.5 mg tab, 5 mg tab, 10 mg tab, 20 mg tab</i>	Tier 1	MO
<i>enalapril-hydrochlorothiazide</i>	Tier 1	MO
<i>ENTRESTO</i>	Tier 2	MO
<i>eplerenone</i>	Tier 2	MO
<i>ezetimibe</i>	Tier 2	MO
<i>felodipine er</i>	Tier 1	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>fenofibrate 48 mg tab, 54 mg tab, 67 mg cap, 134 mg cap, 145 mg tab, 160 mg tab, 200 mg cap</i>	Tier 2	MO
<i>fenofibrate micronized 43 mg cap, 67 mg cap, 130 mg cap, 134 mg cap, 200 mg cap</i>	Tier 2	MO
<i>fenofibric acid</i>	Tier 2	MO
<i>flecainide acetate</i>	Tier 2	MO
<i>fosinopril sodium</i>	Tier 1	MO
<i>fosinopril sodium-hctz</i>	Tier 1	MO
<i>furosemide 10 mg/ml solution inj</i>	Tier 2	MO
<i>furosemide 10 mg/ml solution oral</i>	Tier 2	MO
<i>furosemide 20 mg tab, 40 mg tab, 80 mg tab</i>	Tier 1	MO
<i>furosemide 8 mg/ml solution</i>	Tier 2	MO
<i>gemfibrozil</i>	Tier 2	MO
<i>gnp niacin flush free 400-100 mg cap</i>	Tier 4	[*]
<i>hydralazine hcl 10 mg tab, 20 mg/ml solution, 25 mg tab, 50 mg tab, 100 mg tab</i>	Tier 2	MO
<i>hydrochlorothiazide</i>	Tier 1	MO
<i>indapamide</i>	Tier 2	MO
<i>irbesartan</i>	Tier 1	MO
<i>irbesartan-hydrochlorothiazide</i>	Tier 1	MO
<i>isosorbide dinitrate 5 mg tab, 10 mg tab, 20 mg tab, 30 mg tab</i>	Tier 2	MO
<i>isosorbide mononitrate</i>	Tier 2	MO
<i>isosorbide mononitrate er</i>	Tier 2	MO
<i>JUXTAPID 30 MG CAP</i>	Tier 2	PA; LA; QL (30 per 30 days)
<i>JUXTAPID 5 MG CAP, 10 MG CAP, 20 MG CAP</i>	Tier 2	PA; LA
<i>labetalol hcl 5 mg/ml solution, 100 mg tab, 200 mg tab, 300 mg tab</i>	Tier 1	MO
<i>LANOXIN 250 MCG TAB</i>	Tier 2	PA; MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
LANOXIN 62.5 MCG TAB	Tier 2	MO
<i>lisinopril</i>	Tier 1	MO
<i>lisinopril-hydrochlorothiazide</i>	Tier 1	MO
<i>losartan potassium</i>	Tier 1	MO
<i>losartan potassium-hctz</i>	Tier 1	MO
<i>lovastatin</i>	Tier 1	MO
<i>metolazone</i>	Tier 2	MO
<i>metoprolol succinate er</i>	Tier 1	MO
<i>metoprolol tartrate 5 mg/5ml solution, 25 mg tab, 37.5 mg tab, 50 mg tab, 75 mg tab, 100 mg tab</i>	Tier 1	MO
<i>metoprolol-hydrochlorothiazide</i>	Tier 1	MO
<i>metyrosine</i>	Tier 2	MO
<i>mexiletine hcl</i>	Tier 2	MO
<i>midodrine hcl</i>	Tier 2	MO
<i>minoxidil</i>	Tier 2	MO
<i>MULTAQ</i>	Tier 2	QL (60 per 30 days); MO
<i>nadolol</i>	Tier 1	MO
<i>niacin (antihyperlipidemic)</i>	Tier 2	MO
<i>niacin 50 mg tab, 100 mg tab, 250 mg tab, 500 mg tab</i>	Tier 4	[*]
<i>niacin er (antihyperlipidemic)</i>	Tier 2	MO
<i>niacin er 250 mg cap er, 250 mg tab er, 500 mg cap er, 500 mg tab er</i>	Tier 4	[*]
<i>niacin flush free 400-100 mg cap</i>	Tier 4	[*]
<i>niacinamide 500 mg tab, 500 mg tab er</i>	Tier 4	[*]
<i>niacor</i>	Tier 2	MO
<i>nicardipine hcl 20 mg cap, 30 mg cap</i>	Tier 1	MO
<i>nifedipine er</i>	Tier 1	MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>nifedipine er osmotic release</i>	Tier 1	MO
<i>nimodipine</i>	Tier 1	MO
<b>NITRO-BID</b>	Tier 2	MO
<i>nitroglycerin 0.1 mg/hr patch 24hr, 0.2 mg/hr patch 24hr, 0.3 mg sl tab, 0.4 mg sl tab, 0.4 mg/hr patch 24hr, 0.6 mg sl tab, 0.6 mg/hr patch 24hr</i>	Tier 2	MO
<b>NITROGLYCERIN 5 MG/ML SOLUTION</b>	Tier 2	B/D PA; MO
<i>no flush niacin 400-100 mg cap</i>	Tier 4	[*]
<b>NORTHERA 100 MG CAP</b>	Tier 2	PA; LA; QL (90 per 30 days)
<b>NORTHERA 200 MG CAP, 300 MG CAP</b>	Tier 2	PA; LA; QL (180 per 30 days)
<i>olmesartan-amlodipine-hctz</i>	Tier 2	MO
<i>omega-3-acid ethyl esters</i>	Tier 2	MO
<i>pacerone</i>	Tier 2	MO
<i>pentoxifylline er</i>	Tier 2	MO
<i>pindolol</i>	Tier 1	MO
<i>plain niacin 250 mg tab, 500 mg tab</i>	Tier 4	[*]
<b>PRALUENT</b>	Tier 2	PA; QL (2 per 28 days); MO
<i>pravastatin sodium</i>	Tier 1	MO
<i>prazosin hcl</i>	Tier 1	MO
<i>prevalite 4 gm packet, 4 gm/dose powder</i>	Tier 2	MO
<i>procainamide hcl</i>	Tier 2	MO
<i>propafenone hcl</i>	Tier 2	MO
<i>propranolol hcl 1 mg/ml solution, 10 mg tab, 20 mg tab, 20 mg/5ml solution, 40 mg tab, 40 mg/5ml solution, 60 mg tab, 80 mg tab</i>	Tier 1	MO
<i>propranolol hcl er</i>	Tier 1	MO
<i>quinapril hcl</i>	Tier 1	MO
<i>quinapril-hydrochlorothiazide</i>	Tier 1	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>quinidine sulfate</i>	Tier 2	MO
<i>ramipril</i>	Tier 1	MO
<i>ranolazine er</i>	Tier 2	PA; MO
RECTIV	Tier 2	QL (30 per 30 days); MO
REPATHA	Tier 2	PA; QL (3 per 28 days)
REPATHA PUSHTRONEX SYSTEM	Tier 2	PA; QL (3.5 per 28 days)
REPATHA SURECLICK	Tier 2	PA; QL (3 per 28 days)
<i>rosuvastatin calcium</i>	Tier 2	MO
<i>simvastatin</i>	Tier 1	MO
SLO-NIACIN 250 MG TAB ER, 500 MG TAB ER, 750 MG TAB ER	Tier 4	[*]
SOAANZ 20 MG TAB	Tier 2	MO
SOAANZ 40 MG TAB, 60 MG TAB	Tier 2	
<i>sorine</i>	Tier 1	MO
<i>sotalol hcl</i>	Tier 1	MO
<i>sotalol hcl (af)</i>	Tier 1	MO
<i>spironolactone</i>	Tier 2	MO
<i>spironolactone-hctz</i>	Tier 2	MO
<i>taztia xt</i>	Tier 1	MO
<i>telmisartan</i>	Tier 2	MO
<i>telmisartanamlodipine 80-5 mg tab</i>	Tier 2	MO
<i>telmisartan-hctz</i>	Tier 2	MO
<i>terazosin hcl</i>	Tier 1	MO
<i>tiadylt er 120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h, 360 mg cap er 24h</i>	Tier 1	MO
<i>timolol maleate 5 mg tab, 10 mg tab, 20 mg tab</i>	Tier 1	MO
<i>torsemide</i>	Tier 2	MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>trandolapril</i>	Tier 1	MO
<i>triamterene-hctz</i>	Tier 2	MO
<i>valsartan 40 mg tab, 80 mg tab, 160 mg tab, 320 mg tab</i>	Tier 2	MO
<i>valsartan-hydrochlorothiazide</i>	Tier 1	MO
<i>VASCEPA</i>	Tier 2	MO
<i>VECAMYL</i>	Tier 2	MO
<i>verapamil hcl 2.5 mg/ml solution, 40 mg tab, 80 mg tab, 120 mg tab</i>	Tier 1	MO
<i>verapamil hcl er 100 mg cap er 24h, 120 mg cap er 24h, 120 mg tab er, 180 mg cap er 24h, 180 mg tab er, 200 mg cap er 24h, 240 mg cap er 24h, 240 mg tab er, 300 mg cap er 24h</i>	Tier 1	MO
<i>verapamil hcl er 360 mg cap er 24h</i>	Tier 2	MO
<b>CENTRAL NERVOUS SYSTEM AGENTS</b>		
<i>ADIPEX-P 37.5 MG CAP, 37.5 MG TAB</i>	Tier 3	[*]
<i>amphetamine-dextroamphetamine 30 mg tab</i>	Tier 2	PA; QL (60 per 30 days); MO
<i>amphetamine-dextroamphetamine 5 mg tab, 7.5 mg tab, 10 mg tab, 12.5 mg tab, 15 mg tab, 20 mg tab</i>	Tier 2	PA; QL (90 per 30 days); MO
<i>atomoxetine hcl 10 mg cap, 18 mg cap, 25 mg cap, 40 mg cap</i>	Tier 2	QL (60 per 30 days); MO
<i>atomoxetine hcl 60 mg cap, 80 mg cap, 100 mg cap</i>	Tier 2	QL (30 per 30 days); MO
<i>AUBAGIO</i>	Tier 2	PA; LA; QL (30 per 30 days)
<i>AUSTEDO</i>	Tier 2	PA; LA; QL (120 per 30 days)
<i>AVONEX PEN</i>	Tier 2	PA; QL (4 per 28 days)
<i>AVONEX PREFILLED</i>	Tier 2	PA; QL (4 per 28 days)
<i>benzphetamine hcl 50 mg tab</i>	Tier 3	[*]
<i>BETASERON</i>	Tier 2	PA; QL (15 per 30 days)

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
COPAXONE 20 MG/ML SOLN PRSYR	Tier 2	PA; QL (30 per 30 days)
COPAXONE 40 MG/ML SOLN PRSYR	Tier 2	PA; QL (12 per 28 days)
dalfampridine er	Tier 2	PA; QL (60 per 30 days)
dextroamphetamine sulfate 10 mg tab	Tier 2	QL (180 per 30 days); MO
dextroamphetamine sulfate 5 mg tab	Tier 2	QL (90 per 30 days); MO
dextroamphetamine sulfate er 15 mg cap er 24h	Tier 2	QL (120 per 30 days); MO
dextroamphetamine sulfate er 5 mg cap er 24h, 10 mg cap er 24h	Tier 2	QL (60 per 30 days); MO
DRIZALMA SPRINKLE 20 MG CAP DR, 60 MG CAP DR	Tier 2	QL (60 per 30 days); MO
DRIZALMA SPRINKLE 30 MG CAP DR, 40 MG CAP DR	Tier 2	QL (30 per 30 days); MO
duloxetine hcl 20 mg cp dr part	Tier 2	QL (180 per 30 days); MO
duloxetine hcl 30 mg cp dr part	Tier 2	QL (120 per 30 days); MO
duloxetine hcl 40 mg cp dr part	Tier 2	QL (90 per 30 days); MO
duloxetine hcl 60 mg cp dr part	Tier 2	QL (60 per 30 days); MO
EXTAVIA	Tier 2	PA; QL (15 per 30 days)
GILENYA	Tier 2	PA; QL (30 per 30 days)
goodsense arthritis pain 650 mg tab er	Tier 4	[*]
guanfacine hcl er	Tier 2	PA; QL (30 per 30 days); MO
INGREZZA 40 & 80 MG CAP THPK	Tier 2	PA; QL (56 per 365 over time); NEDS
INGREZZA 40 MG CAP	Tier 2	PA; QL (60 per 30 days)
INGREZZA 60 MG CAP, 80 MG CAP	Tier 2	PA; QL (30 per 30 days)
methylphenidate hcl 5 mg tab, 10 mg tab, 20 mg tab	Tier 2	PA; QL (90 per 30 days); MO
NUEDEXTA	Tier 2	PA; QL (60 per 30 days); MO
phentermine hcl 15 mg cap, 30 mg cap, 37.5 mg cap, 37.5 mg tab	Tier 3	[*]
pregabalin 20 mg/ml solution	Tier 2	QL (900 per 30 days); MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>pregabalin 200 mg cap</i>	Tier 2	QL (90 per 30 days); MO
<i>pregabalin 225 mg cap, 300 mg cap</i>	Tier 2	QL (60 per 30 days); MO
<i>pregabalin 25 mg cap, 50 mg cap, 75 mg cap, 100 mg cap, 150 mg cap</i>	Tier 2	MO
<i>riluzole</i>	Tier 2	
<i>SAVELLA</i>	Tier 2	QL (60 per 30 days); MO
<i>SAVELLA TITRATION PACK</i>	Tier 2	MO
<i>TECFIDERA 120 &amp; 240 MG MISC</i>	Tier 2	PA; LA
<i>TECFIDERA 120 MG CAP DR</i>	Tier 2	PA; LA; QL (14 per 7 days)
<i>TECFIDERA 240 MG CAP DR</i>	Tier 2	PA; LA; QL (60 per 30 days)
<i>tetrabenazine 12.5 mg tab</i>	Tier 2	PA; QL (240 per 30 days)
<i>tetrabenazine 25 mg tab</i>	Tier 2	PA; QL (120 per 30 days)
<i>TYSABRI</i>	Tier 2	PA; LA
<i>zenzedi 10 mg tab</i>	Tier 2	QL (180 per 30 days); MO
<i>zenzedi 5 mg tab</i>	Tier 2	QL (90 per 30 days); MO
<b>DENTAL AND ORAL AGENTS</b>		
<i>chlorhexidine gluconate</i>	Tier 2	MO
<i>KEPIVANCE</i>	Tier 2	MO
<i>oralone</i>	Tier 2	MO
<i>periogard</i>	Tier 2	MO
<i>pilocarpine hcl 5 mg tab, 7.5 mg tab</i>	Tier 2	MO
<i>triamcinolone acetonide 0.1 % paste</i>	Tier 2	MO
<b>DERMATOLOGICAL AGENTS</b>		
<i>accutane</i>	Tier 2	MO
<i>acitretin</i>	Tier 2	MO
<i>acne medication 10 10 % gel</i>	Tier 4	[*]
<i>acyclovir 5 % ointment</i>	Tier 2	QL (30 per 30 days); MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>adapalene 0.3 % gel</i>	Tier 2	MO
<i>ala-cort</i>	Tier 2	MO
<i>alclometasone dipropionate 0.05 % ointment</i>	Tier 2	MO
<i>amcinonide 0.1 % cream, 0.1 % lotion, 0.1 % ointment</i>	Tier 2	MO
<i>ammonium lactate</i>	Tier 2	MO
<i>amnesteem</i>	Tier 2	MO
<i>anti-itch maximum strength 1 % cream</i>	Tier 4	[*]
<i>avita</i>	Tier 2	PA; QL (45 per 30 days); MO
<i>benzoyl peroxide 5 % gel, 10 % gel</i>	Tier 4	[*]
<i>benzoyl peroxide-erythromycin</i>	Tier 2	MO
<i>betamethasone dipropionate 0.05 % cream, 0.05 % lotion</i>	Tier 2	MO
<i>betamethasone dipropionate aug 0.05 % ointment</i>	Tier 2	MO
<i>betamethasone valerate 0.1 % cream, 0.1 % lotion, 0.1 % ointment</i>	Tier 2	MO
<i>CALAMINE 8-8 % LOTION</i>	Tier 4	[*]
<i>calcipotriene 0.005 % cream, 0.005 % ointment</i>	Tier 2	QL (120 per 30 days); MO
<i>calcipotriene 0.005 % solution</i>	Tier 2	QL (60 per 30 days); MO
<i>calcitrene</i>	Tier 2	QL (120 per 30 days); MO
<i>CAPEX</i>	Tier 2	MO
<i>ciclodan 8 % solution</i>	Tier 2	MO
<i>ciclopirox 0.77 % gel, 1 % shampoo, 8 % solution</i>	Tier 2	MO
<i>claravis</i>	Tier 2	MO
<i>clindamycin phosphate 1 % foam</i>	Tier 2	QL (100 per 30 days); MO
<i>clindamycin phosphate 1 % gel</i>	Tier 2	MO
<i>clindamycin phosphate 1 % lotion, 1 % solution</i>	Tier 2	QL (120 per 30 days); MO
<i>clobetasol propionate 0.05 % cream</i>	Tier 2	QL (120 per 30 days); MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>clobetasol propionate 0.05 % solution</i>	Tier 2	QL (50 per 30 days); MO
<i>clotrimazole-betamethasone 1-0.05 % cream</i>	Tier 2	QL (120 per 30 days); MO
DENAVIR	Tier 2	QL (5 per 30 days); MO
<i>desoximetasone 0.05 % cream, 0.25 % cream</i>	Tier 2	QL (100 per 30 days); MO
<i>desoximetasone 0.05 % gel, 0.05 % ointment, 0.25 % ointment</i>	Tier 2	MO
<i>ery</i>	Tier 2	MO
<i>erythromycin 2 % gel, 2 % solution</i>	Tier 2	MO
<i>fluocinolone acetonide 0.01 % cream, 0.01 % solution, 0.025 % cream, 0.025 % ointment</i>	Tier 2	QL (120 per 30 days); MO
<i>fluocinolone acetonide body</i>	Tier 2	QL (120 per 30 days); MO
<i>fluocinolone acetonide scalp</i>	Tier 2	QL (120 per 30 days); MO
<i>fluocinonide 0.05 % cream, 0.05 % gel, 0.05 % ointment, 0.05 % solution</i>	Tier 2	QL (240 per 30 days); MO
<i>fluocinonide emulsified base</i>	Tier 2	QL (240 per 30 days); MO
<i>fluorouracil 2 % solution, 5 % cream, 5 % solution</i>	Tier 2	MO
<i>fluticasone propionate 0.005 % ointment, 0.05 % cream, 0.05 % lotion</i>	Tier 2	MO
GNP CALAMINE 8-8 % LOTION	Tier 4	[*]
<i>gnp hydrocortisone 0.5 % cream</i>	Tier 4	[*]
<i>gnp hydrocortisone max st 1 % ointment</i>	Tier 4	[*]
<i>gnp hydrocortisone plus 1 % cream</i>	Tier 4	[*]
<i>gnp hydrocortisone/aloe 1 % cream</i>	Tier 4	[*]
<i>gnp lice treatment 0.33-4 % shampoo, 1 % liquid</i>	Tier 4	[*]
<i>halobetasol propionate 0.05 % cream, 0.05 % ointment</i>	Tier 2	MO
HM CALAMINE 8-8 % LOTION	Tier 4	[*]
<i>hm hydrocortisone plus 1 % cream</i>	Tier 4	[*]
<i>hm hydrocortisone-aloe max st 1 % cream</i>	Tier 4	[*]

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>hm lice killing max st 0.33-4 % shampoo</i>	Tier 4	[*]
<i>hm lice treatment 1 % liquid</i>	Tier 4	[*]
<i>hydrocortisone (perianal)</i>	Tier 2	MO
<i>hydrocortisone 0.5 % cream, 1 % cream, 1 % ointment</i>	Tier 4	[*]
<i>hydrocortisone 1 % cream, 1 % ointment, 2.5 % cream, 2.5 % lotion, 2.5 % ointment</i>	Tier 2	MO
<i>hydrocortisone max st 1 % cream</i>	Tier 4	[*]
<i>hydrocortisone max st/12 moist 1 % cream</i>	Tier 4	[*]
<i>hydrocortisone valerate 0.2 % cream</i>	Tier 2	MO
<i>imiquimod 5 % cream</i>	Tier 2	MO
<i>isotretinoin</i>	Tier 2	MO
<i>lice killing 0.33-4 % shampoo</i>	Tier 4	[*]
<i>lice killing maximum strength 0.33-4 % shampoo</i>	Tier 4	[*]
<i>lice treatment 1 % lotion</i>	Tier 4	[*]
<i>lindane</i>	Tier 2	MO
<i>mafénide acetate</i>	Tier 2	MO
<i>methoxsalen rapid</i>	Tier 2	
<i>mometasone furoate 0.1 % solution</i>	Tier 2	MO
<i>mupirocin</i>	Tier 2	QL (120 per 30 days); MO
<i>mupirocin calcium</i>	Tier 2	QL (30 per 30 days); MO
<i>myorisan</i>	Tier 2	MO
<i>nystatin-triamcinolone 100000-0.1 unit/gm-% cream</i>	Tier 2	MO
<i>permethrin</i>	Tier 2	MO
<i>pimecrolimus</i>	Tier 2	PA; QL (100 per 90 days); MO; NEDS
<i>podofilox</i>	Tier 2	MO
<i>procto-med hc</i>	Tier 2	MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>procto-pak</i>	Tier 2	MO
<i>proctosol hc</i>	Tier 2	MO
<i>proctozone-hc</i>	Tier 2	MO
QC CALAMINE LOTION	Tier 4	[*]
RID COMPLETE LICE ELIMINATION KIT	Tier 4	[*]
SANTYL	Tier 2	QL (30 per 30 days); MO
<i>selenium sulfide 2.5 % lotion</i>	Tier 2	MO
<i>silver sulfadiazine</i>	Tier 2	MO
SKYRIZI 360 MG/2.4ML SOLN CART	Tier 2	PA; QL (2.4 per 56 days); NEDS
SKYRIZI 600 MG/10ML SOLUTION	Tier 2	PA; QL (10 per 28 days)
<i>sm hydrocortisone max st 1 % ointment</i>	Tier 4	[*]
<i>sm lice killing max strength 0.33-4 % shampoo</i>	Tier 4	[*]
<i>sm lice treatment 1 % lotion</i>	Tier 4	[*]
<i>ssd</i>	Tier 2	MO
STELARA 130 MG/26ML SOLUTION	Tier 2	PA; LA
SULFAMYLYON 85 MG/GM CREAM	Tier 2	MO
<i>tacrolimus 0.03 % ointment, 0.1 % ointment</i>	Tier 2	PA; QL (100 per 90 days); MO; NEDS
<i>tazarotene 0.05 % gel, 0.1 % gel</i>	Tier 2	PA
<i>tazarotene 0.1 % cream</i>	Tier 2	PA; MO
TAZORAC 0.05 % CREAM, 0.05 % GEL, 0.1 % GEL	Tier 2	PA; MO
<i>tretinoin 0.01 % gel, 0.025 % cream, 0.025 % gel, 0.05 % cream, 0.1 % cream</i>	Tier 2	PA; QL (45 per 30 days); MO
<i>triamcinolone acetonide 0.025 % cream, 0.025 % lotion, 0.025 % ointment, 0.1 % cream, 0.1 % lotion, 0.1 % ointment, 0.5 % cream, 0.5 % ointment</i>	Tier 2	MO
<i>triderm</i>	Tier 2	MO
<i>zenatane</i>	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<b>ELECTROLYTES/MINERALS/METALS/VITAMINS</b>		
AMINOSYN II	Tier 2	B/D PA; MO
AMINOSYN-PF	Tier 2	B/D PA; MO
ascorbic acid 500 mg tab	Tier 4	[*]
AURYXIA	Tier 2	PA; MO
b complex cap	Tier 4	[*]
b-1 100 mg tab, 250 mg tab	Tier 4	[*]
b-12 500 mcg tab	Tier 4	[*]
B-12 DOTS 500 MCG TAB DISP	Tier 4	[*]
b-2 50 mg tab	Tier 4	[*]
b-6 100 mg tab	Tier 4	[*]
c-1000 1000 mg tab	Tier 4	[*]
c-1000/rose hips 1000 mg tab	Tier 4	[*]
c-250 250 mg tab	Tier 4	[*]
c-500 500 mg tab	Tier 4	[*]
c-500/rose hips 500 mg tab	Tier 4	[*]
calcitrate 950 (200 ca) mg tab	Tier 4	[*]
CALCIUM 1000 + D 1000-20 MG-MCG TAB	Tier 4	[*]
calcium 500 + d 500-3.125 mg-mcg tab	Tier 4	[*]
calcium 500 + d3 500-15 mg-mcg tab	Tier 4	[*]
CALCIUM 500-2.5 MG-MCG CHEW TAB	Tier 4	[*]
calcium 500/vitamin d 500-3.125 mg-mcg tab	Tier 4	[*]
calcium 600 1500 (600 ca) mg tab	Tier 4	[*]
calcium 600+d 600-20 tab, 600-5 tab	Tier 4	[*]
calcium 600+d3 600-20 mg-mcg tab	Tier 4	[*]
calcium 600/vitamin d 600-10 mg-mcg tab	Tier 4	[*]
calcium 600/vitamin d3 600-20 mg-mcg tab	Tier 4	[*]

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>calcium acetate (phos binder) 667 mg cap</i>	Tier 2	MO
CALCIUM ACETATE 668 (169 CA) MG TAB	Tier 4	[*]
<i>calcium ascorbate 500 mg tab</i>	Tier 4	[*]
<i>calcium carb-cholecalciferol 600-10 tab, 600-5 tab</i>	Tier 4	[*]
CALCIUM CARBONATE 260 MG CHEW TAB, 1250 (500 CA) MG TAB, 1500 (600 CA) MG TAB	Tier 4	[*]
<i>calcium carbonate antacid 1250 mg/5ml suspension</i>	Tier 4	[*]
<i>calcium carbonate-vitamin d 500-5 tab, 600-5 tab</i>	Tier 4	[*]
<i>calcium citrate + d3 maximum 315-250 mg-unit tab</i>	Tier 4	[*]
<i>calcium citrate 250 mg tab, 760 mg/3.5gm granules, 950 (200 ca) mg tab</i>	Tier 4	[*]
CALCIUM CITRATE MALATE-VIT D 250-2.5 MG-MCG TAB	Tier 4	[*]
<i>calcium citrate+d3 petites 200-6.25 mg-mcg tab</i>	Tier 4	[*]
<i>calcium citrate-vitamin d 200-3.125 tab, 315-5 tab, 315-6.25 tab</i>	Tier 4	[*]
CALCIUM CITRATE-VITAMIN D3 1000-0.01 MG/30ML LIQUID	Tier 4	[*]
<i>calcium citrate-vitamin d3 315-6.25 mg-mcg tab</i>	Tier 4	[*]
CALCIUM GLUCONATE 50 MG TAB	Tier 4	[*]
<i>calcium high potency 1500 (600 ca) mg tab</i>	Tier 4	[*]
<i>calcium high potency/vitamin d 600-5 mg-mcg tab</i>	Tier 4	[*]
CALCIUM LACTATE 100 MG TAB	Tier 4	[*]
CALCIUM PLUS D3 ABSORBABLE 600-62.5 MG-MCG CAP	Tier 4	[*]
<i>calcium+d3 600-20 mg-mcg tab</i>	Tier 4	[*]

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>calcium-vitamin d3 250-3.125 mg-mcg tab</i>	Tier 4	[*]
CALCIUM/C/D 500-10-250 MG-MG-UNIT CHEW TAB	Tier 4	[*]
CALTRATE 600+D3 600-20 MG-MCG TAB	Tier 4	[*]
CALTRATE 600+D3 SOFT 600-20 MG-MCG CHEW TAB	Tier 4	[*]
CARBAGLU	Tier 2	PA; LA
<i>carglumic acid</i>	Tier 2	PA; LA
CHELATED CALCIUM 200 MG TAB	Tier 4	[*]
CLASSIC PRENATAL 28-0.8 MG TAB	Tier 4	[*]
CLINIMIX E/DEXTROSE (2.75/5)	Tier 2	B/D PA; MO
CLINIMIX E/DEXTROSE (4.25/10)	Tier 2	B/D PA; MO
CLINIMIX E/DEXTROSE (4.25/5)	Tier 2	B/D PA; MO
CLINIMIX E/DEXTROSE (5/15)	Tier 2	B/D PA; MO
CLINIMIX E/DEXTROSE (5/20)	Tier 2	B/D PA; MO
CLINIMIX E/DEXTROSE (8/10)	Tier 2	B/D PA; MO
CLINIMIX E/DEXTROSE (8/14)	Tier 2	B/D PA; MO
CLINIMIX/DEXTROSE (4.25/10)	Tier 2	B/D PA; MO
CLINIMIX/DEXTROSE (4.25/5)	Tier 2	B/D PA; MO
CLINIMIX/DEXTROSE (5/15)	Tier 2	B/D PA; MO
CLINIMIX/DEXTROSE (5/20)	Tier 2	B/D PA; MO
CLINIMIX/DEXTROSE (6/5)	Tier 2	B/D PA; MO
CLINIMIX/DEXTROSE (8/10)	Tier 2	B/D PA; MO
CLINIMIX/DEXTROSE (8/14)	Tier 2	B/D PA; MO
CLINOLIPID	Tier 2	B/D PA; MO
<i>cyanocobalamin 1000 mcg/ml solution</i>	Tier 3	[*]
<i>daily multiple vitamins tab</i>	Tier 4	[*]
<i>daily value multivitamin tab</i>	Tier 4	[*]

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
deferasirox 125 mg tab sol, 250 mg tab sol, 500 mg tab sol	Tier 2	PA
dextrose	Tier 2	MO
dextrose in lactated ringers	Tier 2	MO
dextrose-nacl 2.5-0.45 % solution, 5-0.2 % solution, 5-0.33 % solution, 5-0.45 % solution, 5-0.9 % solution, 10-0.2 % solution, 10-0.45 % solution	Tier 2	MO
dextrose-sodium chloride 5-0.225 % solution, 5-0.3 % solution, 5-0.45 % solution, 5-0.9 % solution	Tier 2	MO
ferate 240 (27 fe) mg tab	Tier 4	[*]
ferosul 325 (65 fe) mg tab	Tier 4	[*]
FERRETTS 325 (106 FE) MG TAB	Tier 4	[*]
ferrex 150 150 mg cap	Tier 4	[*]
ferric x-150 150 mg cap	Tier 4	[*]
FERROUS GLUCONATE 324 (37.5 FE) MG TAB, 324 (38 FE) MG TAB	Tier 4	[*]
ferrous sulfate 325 (65 fe) mg tab	Tier 4	[*]
ferrous sulfate 75 (15 fe) mg/ml solution, 220 (44 fe) mg/5ml elixir, 220 (44 fe) mg/5ml liquid, 300 (60 fe) mg/5ml syrup, 324 (65 fe) mg tab dr, 325 (65 fe) mg tab dr	Tier 4	[*]
folic acid 0.8 mg cap, 20 mg cap, 400 mcg tab, 800 mcg tab	Tier 4	[*]
folic acid 1 mg tab, 5 mg/ml solution	Tier 3	[*]
FREAMINE III	Tier 2	B/D PA; MO
gnp calcium 1500 (600 ca) mg tab	Tier 4	[*]
gnp calcium 500 +d3 500-15 mg-mcg tab	Tier 4	[*]
gnp calcium 600 +d3 600-20 mg-mcg tab	Tier 4	[*]
gnp calcium citrate +d3 315-250 mg-unit tab	Tier 4	[*]

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>gnp folic acid 400 mcg tab</i>	Tier 4	[*]
<i>gnp iron 200 (65 fe) mg tab</i>	Tier 4	[*]
<i>GNP PRENATAL 28-0.8 MG TAB</i>	Tier 4	[*]
<i>gnp vitamin c 250 mg tab, 500 mg tab, 1000 mg tab</i>	Tier 4	[*]
<i>gnp vitamin c w/rose hips 500-37 mg tab</i>	Tier 4	[*]
<i>gnp vitamin c/rose hips 1000 mg tab</i>	Tier 4	[*]
<i>hepatamine</i>	Tier 2	B/D PA; MO
<i>icaps cap</i>	Tier 4	[*]
<i>iferex 150 150 mg cap</i>	Tier 4	[*]
<i>INTRALIPID</i>	Tier 2	B/D PA; MO
<i>iron 240 (27 fe) mg tab, 325 (65 fe) mg tab</i>	Tier 4	[*]
<i>kcl in dextrose-nacl 10-5-0.45 meq/l-%-% solution, 20-5-0.2 meq/l-%-% solution, 20-5-0.45 meq/l-%-% solution, 20-5-0.9 meq/l-%-% solution, 30-5-0.45 meq/l-%-% solution, 40-5-0.45 meq/l-%-% solution, 40-5-0.9 meq/l-%-% solution</i>	Tier 2	MO
<i>KCL-LACTATED RINGERS-D5W</i>	Tier 2	MO
<i>klor-con 10</i>	Tier 2	MO
<i>klor-con 8 meq tab er</i>	Tier 1	MO
<i>klor-con m10</i>	Tier 1	MO
<i>klor-con m15</i>	Tier 2	MO
<i>klor-con m20</i>	Tier 1	MO
<i>kp adults 50+ daily formula tab</i>	Tier 4	[*]
<i>kp calcium citrate+d 315-250 mg-unit tab</i>	Tier 4	[*]
<i>kp folic acid 1 mg tab, 800 mcg tab</i>	Tier 4	[*]
<i>kp mag-oxide magnesium 200 mg tab</i>	Tier 4	[*]
<i>kp mens 50+ daily formula tab</i>	Tier 4	[*]
<i>kp womens 50+ daily formula tab</i>	Tier 4	[*]

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Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>lactated ringers</i>	Tier 2	MO
<i>lactated ringers solution (irrigation)</i>	Tier 2	MO
<i>levocarnitine 1 gm/10ml solution, 330 mg tab</i>	Tier 2	B/D PA; MO
<i>levocarnitine sf</i>	Tier 2	B/D PA; MO
<i>liquid calcium with d3 600-12.5 mg-mcg cap</i>	Tier 4	[*]
<i>liquid calcium/vitamin d 600-5 mg-mcg cap</i>	Tier 4	[*]
<i>LOKELMA</i>	Tier 2	MO
<i>MAGNESIUM CITRATE 100 MG TAB</i>	Tier 4	[*]
<i>magnesium gluconate 27.5 mg tab</i>	Tier 4	[*]
<i>magnesium lactate 84 mg (7meq) tab er</i>	Tier 4	[*]
<i>magnesium oxide -mg supplement 250 mg tab</i>	Tier 4	[*]
<i>magnesium oxide 250 mg tab, 400 (240 mg) mg tab, 400 mg tab, 500 mg tab</i>	Tier 4	[*]
<i>MAGNESIUM OXIDE 400 240 MG PACKET</i>	Tier 4	[*]
<i>magnesium oxide 420 mg tab, 500 mg cap</i>	Tier 4	[*]
<i>MAGNESIUM SULFATE , 2 GM/50ML SOLUTION, 4 GM/100ML SOLUTION, 4 GM/50ML SOLUTION, 20 GM/500ML SOLUTION, 40 GM/1000ML SOLUTION</i>	Tier 2	MO
<i>magnesium-oxide 400 (240 mg) mg tab</i>	Tier 4	[*]
<i>MAGOX 400 400 (240 MG) MG TAB</i>	Tier 4	[*]
<i>meijer c 500 mg tab</i>	Tier 4	[*]
<i>multiple vitamins essential tab</i>	Tier 4	[*]
<i>MULTIVITAMIN ADULT (MINERALS) TAB</i>	Tier 4	[*]
<i>multivitamin gummies adult chew tab</i>	Tier 4	[*]
<i>multivitamin gummies mens chew tab</i>	Tier 4	[*]
<i>multivitamin gummies womens chew tab</i>	Tier 4	[*]
<i>NUTRILIPID</i>	Tier 2	B/D PA; MO
<i>omega-3 1000 mg cap</i>	Tier 4	[*]

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
one daily adults 50+ tab	Tier 4	[*]
one daily maximum tab	Tier 4	[*]
one daily mens health tab	Tier 4	[*]
one daily womens 50+ tab	Tier 4	[*]
one-daily multi-vitamin tab	Tier 4	[*]
os-cal calcium + d3 500-5 mg-mcg tab	Tier 4	[*]
oysco 500+d 500-200 mg-unit tab	Tier 4	[*]
oyster shell calcium + d 500-5 mg-mcg tab	Tier 4	[*]
oyster shell calcium + d3 500-10 mg-mcg tab	Tier 4	[*]
oyster shell calcium 250+d 250-3.125 mg-mcg tab	Tier 4	[*]
OYSTER SHELL CALCIUM 500 + D 500-3.125 MG-MCG TAB	Tier 4	[*]
oyster shell calcium 500 mg tab	Tier 4	[*]
oyster shell calcium 500+d 500-10 mg-mcg chew tab	Tier 4	[*]
oyster shell calcium plus d 500-5 mg-mcg tab	Tier 4	[*]
oyster shell calcium w/d 500-5 mg-mcg tab	Tier 4	[*]
OYSTER SHELL CALCIUM/D 500-5 MG-MCG TAB	Tier 4	[*]
oyster shell calcium/d3 500-5 mg-mcg tab	Tier 4	[*]
oyster shell calcium/vitamin d 250-3.125 tab, 500-5 tab	Tier 4	[*]
OYSTER SHELL CALCIUM/VITAMIN D 500-5 MG-MCG PACKET	Tier 4	[*]
PHOSLYRA	Tier 2	MO
PLASMA-LYTE 148	Tier 2	MO
poly-iron 150 150 mg cap	Tier 4	[*]
potassium chloride 10 % solution, 20 meq/15ml (10%) solution, 40 meq/15ml (20%) solution	Tier 1	MO
potassium chloride 10 meq cap er	Tier 1	MO

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Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>potassium chloride 10 meq tab er</i>	Tier 1	MO
POTASSIUM CHLORIDE 2 MEQ/ML SOLUTION, 10 MEQ/100ML SOLUTION, 10 MEQ/50ML SOLUTION, 20 MEQ/100ML SOLUTION, 20 MEQ/50ML SOLUTION, 40 MEQ/100ML SOLUTION	Tier 2	MO
<i>potassium chloride 20 meq tab er</i>	Tier 1	MO
<i>potassium chloride 8 meq cap er</i>	Tier 1	MO
<i>potassium chloride 8 meq tab er</i>	Tier 1	MO
<i>potassium chloride crys 10 meq tab er</i>	Tier 1	MO
<i>potassium chloride crys 20 meq tab er</i>	Tier 1	MO
<i>potassium chloride crys er 15 meq tab er</i>	Tier 2	MO
<i>potassium chloride in dextrose</i>	Tier 2	MO
POTASSIUM CHLORIDE IN NACL 20-0.45 MEQ/L-% SOLUTION, 20-0.9 MEQ/L-% SOLUTION	Tier 2	MO
<i>potassium citrate 10 meq (1080 mg) tab er</i>	Tier 2	MO
<i>potassium citrate 15 meq (1620 mg) tab er</i>	Tier 2	MO
<i>potassium citrate 5 meq (540 mg) tab er</i>	Tier 2	MO
PREMASOL	Tier 2	B/D PA; MO
PRENATAL 27-0.8 MG TAB	Tier 4	[*]
PRENATAL ONE DAILY 27-0.8 MG TAB	Tier 4	[*]
<i>prenatal vit w/ iron carbonyl-folic acid</i>	Tier 2	MO
PRENATAL VITAMIN AND MINERAL 28-0.8 MG TAB	Tier 4	[*]
<i>prenatal vitamin with minerals and folic acid greater than 0.8 mg oral tablet</i>	Tier 2	MO
PRENATAL VITAMINS 28-0.8 MG TAB	Tier 4	[*]
<i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha</i>	Tier 2	MO
PRESERVISION AREDS CAP	Tier 4	[*]
QUINTABS TAB	Tier 4	[*]

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
ringers	Tier 2	MO
ringers irrigation	Tier 2	MO
RISACAL-D 105-81-120 MG-MG-UNIT TAB	Tier 4	[*]
sentry senior tab	Tier 4	[*]
sevelamer carbonate 0.8 gm packet, 800 mg tab	Tier 2	QL (540 per 30 days); MO
sevelamer carbonate 2.4 gm packet	Tier 2	QL (180 per 30 days); MO
slow iron 160 (50 fe) mg tab er	Tier 4	[*]
sm complete tab	Tier 4	[*]
sm complete 50+ ultimate mens tab	Tier 4	[*]
sm complete 50+ ultimate women tab	Tier 4	[*]
sm iron 325 (65 fe) mg tab	Tier 4	[*]
sm iron slow release 160 (50 fe) mg tab er	Tier 4	[*]
sodium chloride 0.45 % solution, 2.5 meq/ml solution, 3 % solution, 4 meq/ml solution, 5 % solution	Tier 2	MO
sodium chloride 0.9 % solution irrigation	Tier 2	MO
sodium chloride 0.9 % solution iv	Tier 2	MO
sodium chloride irrigation soln 0.9%	Tier 2	MO
sodium fluoride 2.2 mg	Tier 2	MO
sodium polystyrene sulfonate	Tier 2	MO
sps	Tier 2	MO
thiamine hcl 100 mg tab	Tier 4	[*]
thiamine mononitrate 100 mg tab	Tier 4	[*]
tis-u-sol	Tier 2	MO
TRAVASOL	Tier 2	B/D PA; MO
trientine hcl	Tier 2	
TROPHAMINE	Tier 2	B/D PA; MO
VELPHORO	Tier 2	QL (180 per 30 days); MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
VELTASSA	Tier 2	
VITAMIN A PALMITATE 3 MG (10000 UT) TAB, 4.5 MG (15000 UT) TAB	Tier 4	[*]
<i>vitamin b 12 500 mcg tab</i>	Tier 4	[*]
<i>vitamin b-1 50 mg tab, 250 mg tab</i>	Tier 4	[*]
<i>vitamin b-12 100 mcg tab, 250 mcg tab, 500 mcg sl tab, 500 mcg tab, 1000 mcg tab, 3000 mcg/ml liquid</i>	Tier 4	[*]
<i>vitamin b-2 25 mg tab, 50 mg tab, 100 mg tab</i>	Tier 4	[*]
<i>vitamin b-6 50 mg tab, 100 mg tab</i>	Tier 4	[*]
VITAMIN B12 3000 MCG/ML LIQUID	Tier 4	[*]
<i>vitamin b6 50 mg tab, 250 mg tab</i>	Tier 4	[*]
VITAMIN C (CALCIUM ASCORBATE) RECON SOLN	Tier 4	[*]
<i>vitamin c 100 mg tab, 250 mg tab, 500 mg tab, 500 mg/5ml liquid, 1000 mg tab</i>	Tier 4	[*]
<i>vitamin c-rose hips 500 mg tab, 1000 mg tab</i>	Tier 4	[*]
<i>vitamin e 450 mg (1000 ut) cap</i>	Tier 4	[*]
<b>GASTROINTESTINAL AGENTS</b>		
<i>acid gone 95-358 mg/15ml suspension, 160-105 mg chew tab</i>	Tier 4	[*]
<i>acid reducer 10 mg tab</i>	Tier 4	[*]
<i>acid reducer 20.6 (20 base) mg cap dr</i>	Tier 4	[*]
<i>acid reducer maximum strength 20 mg tab</i>	Tier 4	[*]
<i>almacone double strength 400-400-40 mg/5ml suspension</i>	Tier 4	[*]
<i>alosetron hcl</i>	Tier 2	PA; QL (60 per 30 days); MO
<i>alum &amp; mag hydroxide-simeth 200-200-20 mg/ 5ml suspension, 400-400-40 mg/5ml suspension</i>	Tier 4	[*]

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
alumina-magnesia-simethicone 200-200-20 mg/5ml suspension	Tier 4	[*]
ALUMINUM HYDROXIDE GEL 320 MG/5ML SUSPENSION	Tier 4	[*]
antacid 200-200-20 mg/5ml suspension	Tier 4	[*]
antacid anti-gas max strength 400-400-40 mg/5ml suspension	Tier 4	[*]
antacid anti-gas reg strength 200-200-20 mg/5ml suspension	Tier 4	[*]
antacid calcium 500 mg chew tab	Tier 4	[*]
antacid extra strength 160-105 mg chew tab, 750 mg chew tab	Tier 4	[*]
antacid plus anti-gas relief 200-200-20 mg/5ml suspension, 400-400-40 mg/5ml suspension	Tier 4	[*]
antacid ultra strength 1000 mg chew tab	Tier 4	[*]
anti-diarrheal 2 mg tab	Tier 4	[*]
atropine sulfate 0.25 mg/5ml soln prsyr, 0.5 mg/5ml soln prsyr, 1 mg/10ml soln prsyr	Tier 2	MO
bisacodyl 10 mg suppos	Tier 4	[*]
bisacodyl ec 5 mg tab dr	Tier 4	[*]
bismatrol 262 mg chew tab, 262 mg/15ml suspension	Tier 4	[*]
bismuth 262 mg chew tab	Tier 4	[*]
bismuth subsalicylate 262 mg chew tab	Tier 4	[*]
cal-gest antacid 500 mg chew tab	Tier 4	[*]
calcium antacid 500 mg chew tab	Tier 4	[*]
calcium antacid extra strength 750 mg chew tab	Tier 4	[*]
CALCIUM CARBONATE ANTACID 500 MG CHEW TAB, 648 MG TAB	Tier 4	[*]
cimetidine 300 mg tab, 400 mg tab, 800 mg tab	Tier 2	MO

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Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>clearlax 17 gm/scoop powder</i>	Tier 4	[*]
<i>constulose</i>	Tier 2	MO
<i>dicyclomine hcl 10 mg cap, 10 mg/5ml solution, 20 mg tab</i>	Tier 2	MO
<i>diphenoxylate-atropine 2.5-0.025 mg tab, 2.5-0.025 mg/5ml liquid</i>	Tier 2	MO
<i>docu 50 mg/5ml liquid</i>	Tier 4	[*]
<i>docusate calcium 240 mg cap</i>	Tier 4	[*]
<i>docusate sodium 50 mg/5ml liquid, 100 mg cap, 250 mg cap</i>	Tier 4	[*]
<i>dok 100 mg cap</i>	Tier 4	[*]
<i>dulcolax 1200 mg/15ml suspension</i>	Tier 4	[*]
<i>enema mineral oil enema</i>	Tier 4	[*]
<i>enulose</i>	Tier 2	MO
<i>eq antacid maximum strength 400-400-40 mg/5ml suspension</i>	Tier 4	[*]
<i>famotidine (pf)</i>	Tier 2	MO
<i>famotidine 20 mg tab</i>	Tier 4	[*]
<i>famotidine 20 mg tab, 40 mg tab, 40 mg/4ml solution, 200 mg/20ml solution</i>	Tier 2	MO
<i>famotidine maximum strength 20 mg tab</i>	Tier 4	[*]
<i>famotidine premixed</i>	Tier 2	MO
<i>gas relief 20 mg/0.3ml suspension, 80 mg chew tab</i>	Tier 4	[*]
<i>gas relief drops infants 20 mg/0.3ml suspension</i>	Tier 4	[*]
<i>gas relief extra strength 125 mg cap, 125 mg chew tab</i>	Tier 4	[*]
<i>gas relief infants 20 mg/0.3ml suspension</i>	Tier 4	[*]
<i>gas relief ultra strength 180 mg cap</i>	Tier 4	[*]

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
gas-x ultra strength 180 mg cap	Tier 4	[*]
GATTEX	Tier 2	PA; LA
gavilax 17 gm/scoop powder	Tier 4	[*]
gavilyte-c	Tier 2	MO
gavilyte-g	Tier 2	MO
gavilyte-n with flavor pack	Tier 2	MO
generlac	Tier 2	MO
GLYCERIN (ADULT) 2 GM SUPPOS	Tier 4	[*]
glycolax 17 gm/scoop powder	Tier 4	[*]
glycopyrrolate 0.2 mg/ml solution, 1 mg tab, 2 mg tab	Tier 2	MO
gnp acid reducer 10 mg tab	Tier 4	[*]
gnp acid reducer max st 20 mg tab	Tier 4	[*]
gnp antacid & anti-gas 200-200-20 mg/5ml suspension, 400-400-40 mg/5ml suspension, 1000-60 mg chew tab	Tier 4	[*]
gnp antacid 500 mg chew tab	Tier 4	[*]
gnp antacid extra strength 160-105 mg chew tab, 750 mg chew tab	Tier 4	[*]
gnp antacid regular strength 200-200-20 mg/5ml suspension	Tier 4	[*]
gnp antacid ultra strength 1000 mg chew tab	Tier 4	[*]
gnp anti-gas 180 mg cap	Tier 4	[*]
gnp bisa-lax 5 mg tab dr	Tier 4	[*]
gnp clearlax 17 gm/scoop powder	Tier 4	[*]
gnp gas relief 80 mg chew tab	Tier 4	[*]
gnp gas relief extra strength 125 mg cap, 125 mg chew tab	Tier 4	[*]
gnp lansoprazole 15 mg cap dr	Tier 4	[*]

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Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
gnp magnesium citrate 1.745 gm/30ml solution	Tier 4	[*]
gnp milk of magnesia 1200 mg/15ml suspension	Tier 4	[*]
gnp omeprazole 20 mg tab dr	Tier 4	[*]
gnp pink bismuth 262 mg chew tab, 262 mg tab	Tier 4	[*]
gnp stomach relief 262 mg/15ml suspension	Tier 4	[*]
gnp stomach relief max st 525 mg/15ml suspension	Tier 4	[*]
gnp stool softener 100 mg cap, 250 mg cap	Tier 4	[*]
goodsense antacid 750 mg chew tab	Tier 4	[*]
goodsense clearlax 17 gm/scoop powder	Tier 4	[*]
heartburn relief 10 mg tab	Tier 4	[*]
heartburn relief max st 20 mg tab	Tier 4	[*]
hm advanced antacid max st 400-400-40 mg/5ml suspension	Tier 4	[*]
hm antacid 200-200-20 mg/5ml suspension	Tier 4	[*]
hm antacid anti-gas ex st 400-400-40 mg/5ml suspension	Tier 4	[*]
hm antacid extra strength 750 mg chew tab	Tier 4	[*]
hm antacid regular strength 500 mg chew tab	Tier 4	[*]
hm antacid/antigas 200-200-20 mg/5ml suspension	Tier 4	[*]
hm calcium antacid ex st 750 mg chew tab	Tier 4	[*]
hm clearlax 17 gm/scoop powder	Tier 4	[*]
hm esomeprazole magnesium dr 20 mg cap dr	Tier 4	[*]
hm famotidine 10 mg tab, 20 mg tab	Tier 4	[*]
hm gas relief 80 mg chew tab	Tier 4	[*]
hm gas relief infants drops 20 mg/0.3ml suspension	Tier 4	[*]
hm laxative 5 mg tab dr	Tier 4	[*]

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Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>hm milk of magnesia 1200 mg/15ml suspension</i>	Tier 4	[*]
<i>hm omeprazole 20 mg tab dr</i>	Tier 4	[*]
<i>hm stomach relief 262 mg chew tab</i>	Tier 4	[*]
<i>hm stool softener 100 mg cap</i>	Tier 4	[*]
<i>hyoscyamine sulfate 0.125 mg sl tab, 0.125 mg tab, 0.125 mg tab disp</i>	Tier 2	MO
<i>infants gas relief 20 mg/0.3ml suspension</i>	Tier 4	[*]
<i>lactulose 10 gm/15ml solution, 20 gm/30ml solution</i>	Tier 2	MO
<i>lactulose encephalopathy</i>	Tier 2	MO
<i>lansoprazole 15 mg cap dr</i>	Tier 2	MO
<i>lansoprazole 15 mg cap dr</i>	Tier 4	[*]
<i>lansoprazole 30 mg cap dr</i>	Tier 2	QL (30 per 30 days); MO
<i>LINZESS</i>	Tier 2	QL (30 per 30 days); MO
<i>loperamide hcl 2 mg cap</i>	Tier 2	MO
<i>lubiprostone</i>	Tier 2	QL (60 per 30 days); MO
<i>mag-al plus 200-200-20 mg/5ml liquid</i>	Tier 4	[*]
<i>mag-al plus xs 400-400-40 mg/5ml liquid</i>	Tier 4	[*]
<i>magnesium citrate 1.745 gm/30ml solution</i>	Tier 4	[*]
<i>mi-acid 200-200-20 mg/5ml suspension</i>	Tier 4	[*]
<i>mi-acid gas relief 80 mg chew tab</i>	Tier 4	[*]
<i>milk of magnesia 7.75 % suspension, 400 mg/5ml suspension, 1200 mg/15ml suspension, 2400 mg/30ml suspension</i>	Tier 4	[*]
<i>milk of magnesia concentrate 2400 mg/10ml suspension</i>	Tier 4	[*]
<i>mintox maximum strength 400-400-40 mg/5ml suspension</i>	Tier 4	[*]
<i>MIRALAX 17 GM/SCOOP POWDER</i>	Tier 4	[*]

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
MOVANTIK	Tier 2	QL (30 per 30 days); MO
MOVIPREP	Tier 2	MO
omeprazole	Tier 1	MO
omeprazole 20 mg tab dr	Tier 4	[*]
pantoprazole sodium 20 mg tab dr, 40 mg tab dr	Tier 1	MO
pantoprazole sodium 40 mg recon soln	Tier 2	MO
peg 3350 17 gm packet, 17 gm/scoop powder	Tier 4	[*]
peg 3350-kcl-na bicarb-nacl	Tier 2	MO
peg-3350/electrolytes	Tier 2	MO
peg-3350/electrolytes/ascorbat	Tier 2	MO
peg-kcl-nacl-nasulf-na asc-c	Tier 2	MO
peptic relief 262 mg chew tab	Tier 4	[*]
PHAZYME MAXIMUM STRENGTH 250 MG CAP	Tier 4	[*]
phillips milk of magnesia 400 mg/5ml suspension	Tier 4	[*]
polyethylene glycol 3350 17 gm packet, 17 gm/ scoop powder	Tier 4	[*]
px acid reducer max st 20 mg tab	Tier 4	[*]
px gas relief extra strength 125 mg cap	Tier 4	[*]
px gas relief infants 20 mg/0.3ml suspension	Tier 4	[*]
px gas relief ultra strength 180 mg cap	Tier 4	[*]
px stomach relief 262 mg chew tab, 262 mg/15ml suspension	Tier 4	[*]
qc acid controller 10 mg tab	Tier 4	[*]
qc acid controller max st 20 mg tab	Tier 4	[*]
qc antacid 200-200-20 mg/5ml suspension, 500 mg chew tab	Tier 4	[*]
qc antacid extra strength 750 mg chew tab	Tier 4	[*]

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>qc antacid/anti-gas 200-200-20 mg/5ml suspension, 400-400-40 mg/5ml suspension</i>	Tier 4	[*]
<i>qc anti-gas 180 mg cap</i>	Tier 4	[*]
<i>qc gas relief extra strength 125 mg cap</i>	Tier 4	[*]
<i>qc gentle laxative 10 mg suppos</i>	Tier 4	[*]
<i>qc heartburn antacid 160-105 mg chew tab</i>	Tier 4	[*]
<i>qc magnesium citrate 1.745 gm/30ml solution</i>	Tier 4	[*]
<i>qc milk of magnesia 400 mg/5ml suspension</i>	Tier 4	[*]
<i>qc pink bismuth 262 mg chew tab</i>	Tier 4	[*]
<i>qc stool softener 100 mg cap</i>	Tier 4	[*]
<i>RELISTOR 12 MG/0.6ML SOLUTION</i>	Tier 2	PA; QL (18 per 30 days); MO
<i>RELISTOR 8 MG/0.4ML SOLUTION</i>	Tier 2	PA; QL (12 per 30 days); MO
<i>sb acid reducer 10 mg tab</i>	Tier 4	[*]
<i>sb antacid 500 mg chew tab</i>	Tier 4	[*]
<i>sb antacid extra strength 750 mg chew tab</i>	Tier 4	[*]
<i>sb milk of magnesia 400 mg/5ml suspension</i>	Tier 4	[*]
<i>silace 60 mg/15ml syrup, 150 mg/15ml liquid</i>	Tier 4	[*]
<i>simethicone 80 mg chew tab, 125 mg cap, 125 mg chew tab, 180 mg cap</i>	Tier 4	[*]
<i>simethicone ultra strength 180 mg cap</i>	Tier 4	[*]
<i>sm acid reducer 10 mg tab, 200 mg tab</i>	Tier 4	[*]
<i>sm acid reducer max st 20 mg tab</i>	Tier 4	[*]
<i>sm antacid advanced 200-200-20 mg/5ml suspension</i>	Tier 4	[*]
<i>sm antacid advanced max st 400-400-40 mg/5ml suspension</i>	Tier 4	[*]
<i>sm antacid/antigas 200-200-20 mg/5ml suspension</i>	Tier 4	[*]
<i>sm calcium antacid 500 mg chew tab</i>	Tier 4	[*]

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>sm calcium antacid ex st 750 mg chew tab</i>	Tier 4	[*]
<i>sm clearlax 17 gm/scoop powder</i>	Tier 4	[*]
<i>sm esomeprazole magnesium 20 mg cap dr</i>	Tier 4	[*]
<i>sm gas relief 80 mg chew tab, 125 mg chew tab</i>	Tier 4	[*]
<i>sm gas relief antiflatuent 180 mg cap</i>	Tier 4	[*]
<i>sm gas relief extra strength 125 mg cap</i>	Tier 4	[*]
<i>sm gas relief infants 20 mg/0.3ml suspension</i>	Tier 4	[*]
<i>sm magnesium citrate 1.745 gm/30ml solution</i>	Tier 4	[*]
<i>sm milk of magnesia 1200 mg/15ml suspension</i>	Tier 4	[*]
<i>sm mineral oil enema</i>	Tier 4	[*]
<i>sm omeprazole 20 mg tab dr</i>	Tier 4	[*]
<i>sm stomach relief 262 mg chew tab, 262 mg tab</i>	Tier 4	[*]
<i>sm stool softener 100 mg cap</i>	Tier 4	[*]
<i>stomach relief 262 mg chew tab, 525 mg/30ml suspension</i>	Tier 4	[*]
<i>stomach relief extra strength 525 mg/15ml suspension</i>	Tier 4	[*]
<i>stool softener 100 mg cap</i>	Tier 4	[*]
<i>sucralfate 1 gm tab</i>	Tier 2	MO
<i>TUMS 500 MG CHEW TAB</i>	Tier 4	[*]
<i>TUMS EXTRA STRENGTH 750 750 MG CHEW TAB</i>	Tier 4	[*]
<i>TUMS ULTRA 1000 1000 MG CHEW TAB</i>	Tier 4	[*]
<i>ursodiol 250 mg tab, 300 mg cap, 500 mg tab</i>	Tier 2	MO
<i>XERMELO</i>	Tier 2	PA; LA; QL (90 per 30 days)

#### GENETIC OR ENZYME OR PROTEIN DISORDER: REPLACEMENT, MODIFIERS, TREATMENT

ALDURAZYME	Tier 2	PA; LA
ARALAST NP	Tier 2	PA; LA
<i>betaine</i>	Tier 2	LA

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
CERDELGA	Tier 2	PA
CEREZYME	Tier 2	PA; LA
CREON	Tier 2	MO
<i>cromolyn sodium 100 mg/5ml conc</i>	Tier 2	MO
CYSTADANE	Tier 2	LA
CYSTAGON	Tier 2	LA
CYSTARAN	Tier 2	LA
ELAPRASE	Tier 2	PA; LA
FABRAZYME	Tier 2	PA; LA
<i>javygtor 100 mg tab</i>	Tier 2	PA; LA
LUMIZYME	Tier 2	PA; LA
<i>miglustat</i>	Tier 2	PA; LA
NAGLAZYME	Tier 2	PA; LA
<i>nitisinone</i>	Tier 2	PA
ORFADIN 4 MG/ML SUSPENSION, 20 MG CAP	Tier 2	PA; LA
PROLASTIN-C 1000 MG/20ML SOLUTION	Tier 2	PA; LA
RAVICTI	Tier 2	PA; LA; QL (525 per 30 days)
<i>sapropterin dihydrochloride 100 mg tab</i>	Tier 2	PA
<i>sodium phenylbutyrate 500 mg tab</i>	Tier 2	PA
VPRIV	Tier 2	PA
ZENPEP	Tier 2	MO

## GENITOURINARY AGENTS

<i>alfuzosin hcl er</i>	Tier 2	MO
<i>bethanechol chloride</i>	Tier 2	MO
<i>dutasteride</i>	Tier 2	QL (30 per 30 days); MO
<i>dutasteride-tamsulosin hcl</i>	Tier 2	QL (30 per 30 days); MO
<i>fesoterodine fumarate er</i>	Tier 2	QL (30 per 30 days); MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>finasteride</i>	Tier 2	MO
MYRBETRIQ 25 MG TAB ER 24H, 50 MG TAB ER 24H	Tier 2	QL (30 per 30 days); MO
<i>oxybutynin chloride 5 mg tab</i>	Tier 2	QL (120 per 30 days); MO
<i>oxybutynin chloride 5 mg/5ml syrup</i>	Tier 2	QL (600 per 30 days); MO
<i>oxybutynin chloride er 10 mg tab er 24h, 15 mg tab er 24h</i>	Tier 2	QL (60 per 30 days); MO
<i>oxybutynin chloride er 5 mg tab er 24h</i>	Tier 2	QL (30 per 30 days); MO
OXYTROL FOR WOMEN 3.9 MG/24HR PATCH TW	Tier 4	[*]
<i>penicillamine 250 mg tab</i>	Tier 2	
<i>solifenacin succinate</i>	Tier 2	QL (30 per 30 days); MO
<i>tamsulosin hcl</i>	Tier 2	MO
<i>tolterodine tartrate</i>	Tier 2	QL (60 per 30 days); MO
<i>tolterodine tartrate er</i>	Tier 2	QL (30 per 30 days); MO
TOVIAZ	Tier 2	QL (30 per 30 days); MO
VCF VAGINAL CONTRACEPTIVE 12.5 % FOAM	Tier 4	[*]

### HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)

ACTHAR	Tier 2	PA; LA
<i>alclometasone dipropionate 0.05 % cream</i>	Tier 2	MO
<i>betamethasone dipropionate 0.05 % ointment</i>	Tier 2	MO
<i>betamethasone dipropionate aug 0.05 % cream, 0.05 % lotion</i>	Tier 2	MO
<i>clobetasol prop emollient base</i>	Tier 2	QL (120 per 30 days); MO
<i>clobetasol propionate e</i>	Tier 2	QL (120 per 30 days); MO
<i>dexamethasone 0.5 mg tab, 0.5 mg/5ml elixir, 0.5 mg/5ml solution, 0.75 mg tab, 1 mg tab, 1.5 mg tab, 2 mg tab, 4 mg tab, 6 mg tab</i>	Tier 2	MO
<i>dexamethasone sod phosphate pf 10 mg/ml solution</i>	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>dexamethasone sodium phosphate 4 mg/ml solution, 10 mg/ml solution, 20 mg/5ml solution, 100 mg/10ml solution, 120 mg/30ml solution</i>	Tier 2	MO
<i>fludrocortisone acetate</i>	Tier 2	MO
<i>HEMADY</i>	Tier 2	MO
<i>hydrocortisone acetate 1 % ointment</i>	Tier 4	[*]
<i>hydrocortisone valerate 0.2 % ointment</i>	Tier 2	MO
<i>KORLYM</i>	Tier 2	PA; LA
<i>methylprednisolone</i>	Tier 2	MO
<i>methylprednisolone acetate</i>	Tier 2	MO
<i>methylprednisolone sodium succ 40 mg recon soln, 125 mg recon soln, 1000 mg recon soln</i>	Tier 2	MO
<i>mometasone furoate 0.1 % cream, 0.1 % ointment</i>	Tier 2	MO
<i>prednisolone</i>	Tier 2	MO
<i>prednisolone sodium phosphate 6.7 (5 base) mg/5ml solution, 15 mg/5ml solution</i>	Tier 2	MO
<i>prednisone 1 mg tab, 2.5 mg tab, 5 mg (21) tab thpk, 5 mg (48) tab thpk, 5 mg tab, 5 mg/5ml solution, 10 mg (21) tab thpk, 10 mg (48) tab thpk, 10 mg tab, 20 mg tab, 50 mg tab</i>	Tier 2	MO
<i>PREDNISONE INTENSOL</i>	Tier 2	MO
<i>scalpicin maximum strength 1 % solution</i>	Tier 4	[*]
<i>triamcinolone acetonide 40 mg/ml suspension</i>	Tier 2	MO
<b>HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PITUITARY)</b>		
<i>desmopressin ace spray refrigerated</i>	Tier 2	MO
<i>desmopressin acetate 0.1 mg tab, 0.2 mg tab, 4 mcg/ml solution</i>	Tier 2	MO
<i>desmopressin acetate pf</i>	Tier 2	MO
<i>desmopressin acetate spray</i>	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
INCRELEX	Tier 2	PA; LA
NORDITROPIN FLEXPRO	Tier 2	PA
OMNITROPE 5 MG/1.5ML SOLN CART, 5.8 MG RECON SOLN, 10 MG/1.5ML SOLN CART	Tier 2	PA; LA
<b>HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PROSTAGLANDINS)</b>		
<i>misoprostol</i>	Tier 2	MO
<b>HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (SEX HORMONES/MODIFIERS)</b>		
<i>afirmelle</i>	Tier 2	MO
<i>aftera 1.5 mg tab</i>	Tier 4	[*]
<i>altavera</i>	Tier 2	MO
<i>alyacen 1/35</i>	Tier 2	MO
<i>alyacen 7/7/7</i>	Tier 2	MO
<i>amabelz</i>	Tier 2	PA; MO
<i>apri</i>	Tier 2	MO
<i>aranelle</i>	Tier 2	MO
<i>aubra</i>	Tier 2	MO
<i>aubra eq</i>	Tier 2	MO
<i>aurovela 1.5/30</i>	Tier 2	MO
<i>aurovela 1/20</i>	Tier 2	MO
<i>aurovela fe 1.5/30</i>	Tier 2	MO
<i>aurovela fe 1/20</i>	Tier 2	MO
<i>aviane</i>	Tier 2	MO
<i>ayuna</i>	Tier 2	MO
<i>azurette</i>	Tier 2	MO
<i>balziva</i>	Tier 2	MO
<i>blisovi fe 1.5/30</i>	Tier 2	MO
<i>blisovi fe 1/20</i>	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
briellyn	Tier 2	MO
camila	Tier 2	MO
chateal	Tier 2	MO
chateal eq	Tier 2	MO
cryselle-28	Tier 2	MO
cyclafem 1/35	Tier 2	MO
cyclafem 7/7/7	Tier 2	MO
cyred	Tier 2	MO
cyred eq	Tier 2	MO
danazol	Tier 2	MO
dasetta 1/35	Tier 2	MO
dasetta 7/7/7	Tier 2	MO
deblitane	Tier 2	MO
delyla	Tier 2	MO
desogestrel-ethynodiol estradiol	Tier 2	MO
drospirenone-ethynodiol estradiol 3-0.03 mg tab	Tier 2	MO
DUAVEE	Tier 2	PA; QL (30 per 30 days); MO
econtra ez 1.5 mg tab	Tier 4	[*]
elinest	Tier 2	MO
ELLA	Tier 2	MO
eluryng	Tier 2	MO
emoquette	Tier 2	MO
enpresse-28	Tier 2	MO
enskyce	Tier 2	MO
errin	Tier 2	MO
estarrylla	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>estradiol 0.025 mg/24hr patch wk, 0.0375 mg/24hr patch wk, 0.05 mg/24hr patch wk, 0.06 mg/24hr patch wk, 0.075 mg/24hr patch wk, 0.1 mg/24hr patch wk</i>	Tier 2	PA; QL (4 per 28 days); MO
<i>estradiol 0.1 mg/gm cream, 0.5 mg tab, 1 mg tab, 2 mg tab</i>	Tier 2	MO
<i>ESTRING</i>	Tier 2	QL (1 per 90 days); MO; NEDS
<i>ethynodiol diac-eth estradiol</i>	Tier 2	MO
<i>etonogestrel-ethynodiol estradiol</i>	Tier 2	MO
<i>falmina</i>	Tier 2	MO
<i>femynor</i>	Tier 2	MO
<i>hailey 1.5/30</i>	Tier 2	MO
<i>hailey fe 1.5/30</i>	Tier 2	MO
<i>hailey fe 1/20</i>	Tier 2	MO
<i>heather</i>	Tier 2	MO
<i>hydroxyprogesterone caproate 1.25 gm/5ml solution</i>	Tier 2	PA; QL (25 per 147 over time); NEDS
<i>iclevia</i>	Tier 2	MO
<i>incassia</i>	Tier 2	MO
<i>introvale</i>	Tier 2	MO
<i>isibloom</i>	Tier 2	MO
<i>jencycla</i>	Tier 2	MO
<i>jolessa</i>	Tier 2	MO
<i>juleber</i>	Tier 2	MO
<i>junel 1.5/30</i>	Tier 2	MO
<i>junel 1/20</i>	Tier 2	MO
<i>junel fe 1.5/30</i>	Tier 2	MO
<i>junel fe 1/20</i>	Tier 2	MO
<i>kalliga</i>	Tier 2	MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>kariva</i>	Tier 2	MO
<i>kelnor 1/35</i>	Tier 2	MO
<i>kelnor 1/50</i>	Tier 2	MO
<i>kurvelo</i>	Tier 2	MO
<i>larin 1.5/30</i>	Tier 2	MO
<i>larin 1/20</i>	Tier 2	MO
<i>larin fe 1.5/30</i>	Tier 2	MO
<i>larin fe 1/20</i>	Tier 2	MO
<i>larissia</i>	Tier 2	MO
<i>leena</i>	Tier 2	MO
<i>lessina</i>	Tier 2	MO
<i>levonest</i>	Tier 2	MO
<i>levonorg-eth estrad triphasic</i>	Tier 2	MO
<i>levonorgest-eth estrad 91-day 0.15-0.03 mg tab</i>	Tier 2	MO
<i>levonorgestrel-ethinyl estrad 0.1-20 tab, 0.15-30 tab</i>	Tier 2	MO
<i>levora 0.15/30 (28)</i>	Tier 2	MO
<i>lillow</i>	Tier 2	MO
<i>loestrin 1.5/30 (21)</i>	Tier 2	MO
<i>loestrin 1/20 (21)</i>	Tier 2	MO
<i>loestrin fe 1.5/30</i>	Tier 2	MO
<i>loestrin fe 1/20</i>	Tier 2	MO
<i>low-ogestrel</i>	Tier 2	MO
<i>lutera</i>	Tier 2	MO
<i>lyleq</i>	Tier 2	MO
<i>lyza</i>	Tier 2	MO
<i>marlissa</i>	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>medroxyprogesterone acetate 2.5 mg tab, 5 mg tab, 10 mg tab, 150 mg/ml susp prsyr, 150 mg/ml suspension</i>	Tier 2	MO
<i>megestrol acetate 20 mg tab, 40 mg tab</i>	Tier 2	PA; MO
<i>megestrol acetate 40 mg/ml suspension, 400 mg/10ml suspension, 800 mg/20ml suspension</i>	Tier 2	PA; MO
<i>MENEST</i>	Tier 2	PA; MO
<i>microgestin 1.5/30</i>	Tier 2	MO
<i>microgestin 1/20</i>	Tier 2	MO
<i>microgestin 24 fe</i>	Tier 2	MO
<i>microgestin fe 1.5/30</i>	Tier 2	MO
<i>microgestin fe 1/20</i>	Tier 2	MO
<i>mili</i>	Tier 2	MO
<i>mono-linyah</i>	Tier 2	MO
<i>my choice 1.5 mg tab</i>	Tier 4	[*]
<i>my way 1.5 mg tab</i>	Tier 4	[*]
<i>necon 0.5/35 (28)</i>	Tier 2	MO
<i>nora-be</i>	Tier 2	MO
<i>norethin ace-eth estrad-fe 1-20 tab, 1.5-30 tab</i>	Tier 2	MO
<i>norethindrone</i>	Tier 2	MO
<i>norethindrone acet-ethynil est</i>	Tier 2	MO
<i>norethindrone acetate</i>	Tier 2	MO
<i>norgestim-eth estrad triphasic 0.18/0.215/0.25 mg-35 mcg tab</i>	Tier 2	MO
<i>norgestimate-eth estradiol</i>	Tier 2	MO
<i>norlyda</i>	Tier 2	MO
<i>norlyroc</i>	Tier 2	MO
<i>nortrel 0.5/35 (28)</i>	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>nortrel 1/35 (21)</i>	Tier 2	MO
<i>nortrel 1/35 (28)</i>	Tier 2	MO
<i>nortrel 7/7/7</i>	Tier 2	MO
<i>nylia 1/35</i>	Tier 2	MO
<i>nylia 7/7/7</i>	Tier 2	MO
<i>ocella</i>	Tier 2	MO
<i>opcicon one-step 1.5 mg tab</i>	Tier 4	[*]
<i>orsythia</i>	Tier 2	MO
<i>oxandrolone 10 mg tab</i>	Tier 2	PA; QL (60 per 30 days); MO
<i>oxandrolone 2.5 mg tab</i>	Tier 2	PA; QL (240 per 30 days); MO
<i>philith</i>	Tier 2	MO
<i>pimtrea</i>	Tier 2	MO
<i>pirmella 1/35</i>	Tier 2	MO
<i>pirmella 7/7/7</i>	Tier 2	MO
<i>portia-28</i>	Tier 2	MO
PREMARIN 0.3 MG TAB, 0.45 MG TAB, 0.625 MG TAB, 0.9 MG TAB, 1.25 MG TAB	Tier 2	PA; MO
PREMARIN 0.625 MG/GM CREAM	Tier 2	MO
PREMPRO	Tier 2	PA; MO
<i>progesterone 100 mg cap, 200 mg cap</i>	Tier 2	MO
<i>raloxifene hcl</i>	Tier 2	QL (30 per 30 days); MO
<i>react 1.5 mg tab</i>	Tier 4	[*]
<i>reclipsen</i>	Tier 2	MO
<i>setlakin</i>	Tier 2	MO
<i>sharobel</i>	Tier 2	MO
<i>simliya</i>	Tier 2	MO
<i>sprintec 28</i>	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
sronyx	Tier 2	MO
syeda	Tier 2	MO
tarina fe 1/20	Tier 2	MO
tarina fe 1/20 eq	Tier 2	MO
testosterone 1.62 % gel, 20.25 mg/act (1.62%) gel, 40.5 mg/2.5gm (1.62%) gel	Tier 2	PA; QL (150 per 30 days); MO
testosterone 20.25 mg/1.25gm (1.62%) gel	Tier 2	PA; QL (112.5 per 30 days); MO
testosterone 25 mg/2.5gm (1%) gel, 50 mg/5gm (1%) gel	Tier 2	PA; QL (300 per 30 days); MO
testosterone cypionate	Tier 2	PA; MO
testosterone enanthate	Tier 2	PA; MO
tri femynor	Tier 2	MO
tri-estarrylla	Tier 2	MO
tri-linyah	Tier 2	MO
tri-mili	Tier 2	MO
tri-nymyo	Tier 2	MO
tri-sprintec	Tier 2	MO
tri-vylibra	Tier 2	MO
trivora (28)	Tier 2	MO
velivet	Tier 2	MO
vienna	Tier 2	MO
viorele	Tier 2	MO
volnea	Tier 2	MO
vyfemla	Tier 2	MO
vylibra	Tier 2	MO
wera	Tier 2	MO
zovia 1/35 (28)	Tier 2	MO
zovia 1/35e (28)	Tier 2	MO

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>zumandimine</i>	Tier 2	MO
<b>HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (THYROID)</b>		
<i>euthyrox</i>	Tier 1	MO
<i>levo-t</i>	Tier 1	MO
<i>levothyroxine sodium 25 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab, 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 300 mcg tab</i>	Tier 1	MO
<i>levoxyl</i>	Tier 1	MO
<i>liothyronine sodium 5 mcg tab, 25 mcg tab, 50 mcg tab</i>	Tier 2	MO
<i>SYNTHROID</i>	Tier 2	MO
<i>unithroid</i>	Tier 1	MO
<b>HORMONAL AGENTS, SUPPRESSANT (ADRENAL)</b>		
<i>LYSODREN</i>	Tier 2	MO
<b>HORMONAL AGENTS, SUPPRESSANT (PITUITARY)</b>		
<i>cabergoline</i>	Tier 2	MO
<i>FIRMAGON</i>	Tier 2	PA
<i>FIRMAGON (240 MG DOSE)</i>	Tier 2	PA
<i>LANREOTIDE ACETATE</i>	Tier 2	PA
<i>leuprolide acetate</i>	Tier 2	PA; MO
<i>LUPRON DEPOT (1-MONTH) 3.75 MG KIT</i>	Tier 2	PA; QL (1 per 28 days)
<i>LUPRON DEPOT (1-MONTH) 7.5 MG KIT</i>	Tier 2	PA
<i>LUPRON DEPOT-PED (1-MONTH) 7.5 MG KIT</i>	Tier 2	PA; QL (1 per 28 days)
<i>octreotide acetate</i>	Tier 2	PA
<i>ORGOVYX</i>	Tier 2	PA; LA; QL (32 per 30 days)
<i>SIGNIFOR</i>	Tier 2	PA; LA
<i>SOMATULINE DEPOT</i>	Tier 2	PA

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
SOMAVERT	Tier 2	PA; LA
SYNAREL	Tier 2	PA
TRELSTAR MIXJECT	Tier 2	PA
<b>HORMONAL AGENTS, SUPPRESSANT (THYROID)</b>		
<i>methimazole</i>	Tier 2	MO
<i>propylthiouracil</i>	Tier 2	MO
<b>IMMUNOLOGICAL AGENTS</b>		
ACTHIB	Tier 1	
ACTIMMUNE	Tier 2	PA; LA
ADACEL	Tier 1	
ARCALYST	Tier 2	PA
ATGAM	Tier 2	B/D PA
<i>azathioprine 50 mg tab</i>	Tier 2	B/D PA; MO
AZATHIOPRINE SODIUM	Tier 2	B/D PA
BCG VACCINE	Tier 2	
BENLYSTA 120 MG RECON SOLN, 200 MG/ML SOLN A-INJ, 200 MG/ML SOLN PRSYR, 400 MG RECON SOLN	Tier 2	PA
BEXSERO	Tier 2	
BOOSTRIX	Tier 1	
CINRYZE	Tier 2	PA; LA
COSENTYX (300 MG DOSE)	Tier 2	PA; LA; QL (8 per 28 days)
COSENTYX 150 MG/ML SOLN PRSYR	Tier 2	PA; LA; QL (8 per 28 days)
COSENTYX 75 MG/0.5ML SOLN PRSYR	Tier 2	PA; QL (2 per 28 days)
COSENTYX SENSOREADY (300 MG)	Tier 2	PA; LA; QL (8 per 28 days)
COSENTYX SENSOREADY PEN	Tier 2	PA; LA; QL (8 per 28 days)
<i>cyclosporine 25 mg cap, 50 mg/ml solution, 100 mg cap</i>	Tier 2	B/D PA

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>cyclosporine modified 25 mg cap, 50 mg cap, 100 mg cap, 100 mg/ml solution</i>	Tier 2	B/D PA
DAPTACEL	Tier 1	
DIPHTHERIA-TETANUS TOXOIDS DT	Tier 2	
ENBREL 25 MG RECON SOLN, 50 MG/ML SOLN PRSYR	Tier 2	PA; QL (8 per 28 days)
ENBREL 25 MG/0.5ML SOLN PRSYR	Tier 2	PA; QL (4.08 per 28 days)
ENBREL 25 MG/0.5ML SOLUTION	Tier 2	PA; QL (4 per 28 days)
ENBREL MINI	Tier 2	PA; QL (8 per 28 days)
ENBREL SURECLICK	Tier 2	PA; QL (8 per 28 days)
ENGERIX-B	Tier 1	B/D PA
<i>everolimus 0.25 mg tab, 0.5 mg tab, 0.75 mg tab</i>	Tier 2	B/D PA
<i>everolimus 1 mg tab</i>	Tier 2	B/D PA
GAMUNEX-C	Tier 2	PA
GARDASIL 9	Tier 2	
<i>genograf 25 mg cap, 100 mg cap, 100 mg/ml solution</i>	Tier 2	B/D PA
HAVRIX	Tier 1	
HIBERIX	Tier 1	
HUMIRA 10 MG/0.1ML PREF SY KT, 20 MG/0.2ML PREF SY KT	Tier 2	PA; QL (2 per 28 days)
HUMIRA 40 MG/0.4ML PREF SY KT, 40 MG/0.8ML PREF SY KT	Tier 2	PA; QL (4 per 28 days)
HUMIRA PEDIATRIC CROHNS START 80 MG/0.8ML & 40MG/0.4ML PREF SY KT	Tier 2	PA; QL (12 per 365 over time); NEDS
HUMIRA PEDIATRIC CROHNS START 80 MG/0.8ML PREF SY KT	Tier 2	PA; QL (6 per 365 over time); NEDS
HUMIRA PEN 40 MG/0.4ML PEN KIT, 40 MG/0.8ML PEN KIT	Tier 2	PA; QL (4 per 28 days)

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
HUMIRA PEN 80 MG/0.8ML PEN KIT	Tier 2	PA; QL (6 per 84 over time); NEDS
HUMIRA PEN-CD/UC/HS STARTER 40 MG/0.8ML PEN KIT	Tier 2	PA; QL (12 per 365 over time); NEDS
HUMIRA PEN-CD/UC/HS STARTER 80 MG/0.8ML PEN KIT	Tier 2	PA; QL (6 per 365 over time); NEDS
HUMIRA PEN-PEDIATRIC UC START	Tier 2	PA; QL (8 per 365 over time); NEDS
HUMIRA PEN-PS/UV/ADOL HS START	Tier 2	PA; QL (8 per 365 over time); NEDS
HUMIRA PEN-PSOR/UVEIT STARTER	Tier 2	PA; QL (6 per 365 over time); NEDS
HYPERRAB	Tier 2	
HYPERRAB S/D	Tier 2	
<i>icatibant acetate</i>	Tier 2	PA
ILARIS	Tier 2	PA; LA
IMOGLAM RABIES-HT	Tier 2	
IMOVAX RABIES	Tier 2	
INFANRIX	Tier 2	
INFLIXIMAB	Tier 2	PA
INTRON A 6000000 UNIT/ML SOLUTION, 10000000 UNIT RECON SOLN, 10000000 UNIT/ML SOLUTION, 18000000 UNIT RECON SOLN, 50000000 UNIT RECON SOLN	Tier 2	B/D PA
IPOL	Tier 1	
IXIARO	Tier 2	
KEDRAB	Tier 2	
KINRIX	Tier 2	
<i>leflunomide</i>	Tier 2	MO
M-M-R II	Tier 1	
MENACTRA	Tier 2	
MENQUADFI	Tier 2	
MENVEO	Tier 2	

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>methotrexate</i>	Tier 2	MO
<i>methotrexate sodium (pf)</i>	Tier 2	
<i>methotrexate sodium 1 gm recon soln, 50 mg/2ml solution, 250 mg/10ml solution</i>	Tier 2	
<i>methotrexate sodium 2.5 mg tab</i>	Tier 2	MO
<i>mycophenolate mofetil 200 mg/ml recon susp, 250 mg cap, 500 mg recon soln, 500 mg tab</i>	Tier 2	B/D PA
<i>mycophenolate mofetil hcl</i>	Tier 2	B/D PA
<i>mycophenolate sodium</i>	Tier 2	B/D PA
<i>NULOJIX</i>	Tier 2	PA
<i>OCTAGAM 1 GM/20ML SOLUTION, 2 GM/20ML SOLUTION, 2.5 GM/50ML SOLUTION, 5 GM/100ML SOLUTION, 25 GM/500ML SOLUTION, 30 GM/300ML SOLUTION</i>	Tier 2	PA
<i>PEDIARIX</i>	Tier 2	
<i>PEDVAX HIB</i>	Tier 1	
<i>PEGASYS</i>	Tier 2	
<i>PENTACEL</i>	Tier 2	
<i>PRIORIX</i>	Tier 2	
<i>PROGRAF 0.2 MG PACKET, 1 MG PACKET, 5 MG/ML SOLUTION</i>	Tier 2	B/D PA
<i>PROQUAD</i>	Tier 2	
<i>QUADRACEL</i>	Tier 2	
<i>RABAVERT</i>	Tier 2	
<i>RECOMBIVAX HB</i>	Tier 1	B/D PA
<i>REMICADE</i>	Tier 2	PA
<i>RIDAURA</i>	Tier 2	MO
<i>RINVOQ</i>	Tier 2	PA; QL (30 per 30 days)
<i>ROTARIX</i>	Tier 2	

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
ROTATEQ	Tier 1	
sajazir	Tier 2	PA
SHINGRIX	Tier 2	
SIMULECT	Tier 2	B/D PA
<i>sirolimus 0.5 mg tab, 1 mg tab, 1 mg/ml solution, 2 mg tab</i>	Tier 2	B/D PA
SKYRIZI (150 MG DOSE)	Tier 2	PA; QL (6 per 365 over time); NEDS
SKYRIZI 150 MG/ML SOLN PRSYR	Tier 2	PA; QL (6 per 365 over time); NEDS
SKYRIZI PEN	Tier 2	PA; QL (6 per 365 over time); NEDS
STAMARIL	Tier 2	
STELARA 45 MG/0.5ML SOLN PRSYR, 90 MG/ML SOLN PRSYR	Tier 2	PA; QL (1 per 28 days)
STELARA 45 MG/0.5ML SOLUTION	Tier 2	PA; LA; QL (1 per 28 days)
SYNAGIS	Tier 2	PA
<i>tacrolimus 0.5 mg cap, 1 mg cap, 5 mg cap</i>	Tier 2	B/D PA
TDVAX	Tier 1	
temsirolimus	Tier 2	PA
TENIVAC	Tier 2	
THYMOGLOBULIN	Tier 2	B/D PA
TICOVAC	Tier 2	
TREXALL	Tier 2	MO
TRUMENBA	Tier 2	
TWINRIX	Tier 1	
TYPHIM VI	Tier 2	
VAQTA	Tier 2	
VARIVAX	Tier 2	
VARIZIG	Tier 2	
XATMEP	Tier 2	

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
XOLAIR 150 MG RECON SOLN, 150 MG/ML SOLN PRSYR	Tier 2	PA; LA; QL (8 per 28 days)
XOLAIR 75 MG/0.5ML SOLN PRSYR	Tier 2	PA; LA; QL (4 per 28 days)
YF-VAX	Tier 2	
ZORTRESS 1 MG TAB	Tier 2	B/D PA

### INFLAMMATORY BOWEL DISEASE AGENTS

<i>balsalazide disodium</i>	Tier 2	MO
<i>budesonide 3 mg cp dr part</i>	Tier 2	MO
<i>budesonide er</i>	Tier 2	PA; MO
<i>hydrocortisone 5 mg tab, 10 mg tab, 20 mg tab, 100 mg/60ml enema</i>	Tier 2	MO
<i>mesalamine 1.2 gm tab dr, 4 gm enema, 1000 mg suppos</i>	Tier 2	MO
<i>mesalamine er 0.375 gm cap er 24h</i>	Tier 2	MO
<i>mesalamine er 500 mg cap er</i>	Tier 2	
<i>mesalamine-cleanser</i>	Tier 2	MO
<i>PENTASA</i>	Tier 2	MO
<i>sulfasalazine</i>	Tier 2	MO

### METABOLIC BONE DISEASE AGENTS

<i>alendronate sodium 10 mg tab</i>	Tier 2	QL (30 per 30 days); MO
<i>alendronate sodium 35 mg tab, 70 mg tab</i>	Tier 2	QL (4 per 28 days); MO
<i>alendronate sodium 70 mg/75ml solution</i>	Tier 2	QL (300 per 28 days); MO
<i>aqueous vitamin d 10 mcg/ml liquid</i>	Tier 4	[*]
<i>calcitonin (salmon) 200 unit/act solution</i>	Tier 2	QL (4 per 30 days); MO
<i>calcitonin (salmon) 200 unit/ml solution</i>	Tier 2	B/D PA; MO
<i>calcitriol 0.25 mcg cap, 0.5 mcg cap</i>	Tier 2	B/D PA; MO
<i>calcitriol inj 1 mcg/ml</i>	Tier 2	MO
<i>cinacalcet hcl 30 mg tab, 60 mg tab</i>	Tier 2	B/D PA; QL (60 per 30 days)

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>cinacalcet hcl 90 mg tab</i>	Tier 2	B/D PA; QL (120 per 30 days)
<i>d-3-5 125 mcg (5000 ut) cap</i>	Tier 4	[*]
<i>D-VI-SOL 10 MCG/ML LIQUID</i>	Tier 4	[*]
<i>d3 super strength 50 mcg (2000 ut) cap</i>	Tier 4	[*]
<i>d3-1000 d3-1000 25 mcg (1000 ut) cap, d3-1000 25 mcg (1000 ut) tab</i>	Tier 4	[*]
<i>delta d3 10 mcg (400 unit) tab</i>	Tier 4	[*]
<i>dialyvite vitamin d 5000 125 mcg (5000 ut) cap</i>	Tier 4	[*]
<i>doxercalciferol 0.5 mcg cap</i>	Tier 2	B/D PA; MO
<i>FORTEO</i>	Tier 2	PA; QL (3 per 28 days)
<i>gnp vitamin d-400 10 mcg (400 unit) tab</i>	Tier 4	[*]
<i>ibandronate sodium 150 mg tab</i>	Tier 2	QL (1 per 28 days); MO
<i>NATPARA</i>	Tier 2	PA; QL (2 per 28 days)
<i>natural vitamin d-3 125 mcg (5000 ut) tab</i>	Tier 4	[*]
<i>pamidronate disodium 30 mg/10ml solution, 90 mg/10ml solution</i>	Tier 2	
<i>PAMIDRONATE DISODIUM 6 MG/ML SOLUTION</i>	Tier 2	B/D PA
<i>paricalcitol 1 mcg cap, 2 mcg cap, 4 mcg cap</i>	Tier 2	B/D PA; MO
<i>PROLIA</i>	Tier 2	PA; QL (1 per 180 over time); NEDS
<i>TERIPARATIDE (RECOMBINANT)</i>	Tier 2	PA; QL (3 per 28 days)
<i>TYMLOS</i>	Tier 2	PA; QL (1.56 per 28 days)
<i>vitamin d (cholecalciferol) 10 mcg (400 unit) tab, 25 mcg (1000 ut) cap, 25 mcg (1000 ut) tab</i>	Tier 4	[*]
<i>vitamin d (ergocalciferol) 1.25 mg (50000 ut) cap</i>	Tier 3	[*]
<i>vitamin d 10 mcg/ml liquid, 25 mcg (1000 ut) tab, 50 mcg (2000 ut) cap, 50 mcg (2000 ut) tab</i>	Tier 4	[*]
<i>vitamin d high potency 25 mcg (1000 ut) cap</i>	Tier 4	[*]
<i>VITAMIN D2 10 MCG (400 UNIT) TAB</i>	Tier 4	[*]

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
VITAMIN D3 1.25 MG (50000 UT) CAP, 10 MCG (400 UNIT) TAB, 25 MCG (1000 UT) CAP, 25 MCG (1000 UT) TAB, 50 MCG (2000 UT) CAP, 50 MCG (2000 UT) TAB, 75 MCG (3000 UT) TAB, 125 MCG (5000 UT) CAP, 125 MCG (5000 UT) TAB, 250 MCG (10000 UT) CAP	Tier 4	[*]
XGEVA	Tier 2	PA; QL (5.1 per 28 days)
<i>zoledronic acid 4 mg/100ml solution, 4 mg/5ml conc</i>	Tier 2	PA
<b>MISCELLANEOUS THERAPEUTIC AGENTS</b>		
ACCU-CHEK AVIVA PLUS STRIP	Tier 4	[*]
ACCU-CHEK FASTCLIX LANCETS MISC	Tier 4	[*]
ACCU-CHEK SMARTVIEW STRIP	Tier 4	[*]
ACCU-CHEK SOFTCLIX LANCETS MISC	Tier 4	[*]
<i>acetylcysteine 200 mg/ml solution</i>	Tier 2	MO
ALCOHOL SWABS	Tier 1	MO
ASSURE LANCE LANCETS MISC	Tier 4	[*]
AYR NASAL MIST ALLERGY/SINUS 2.65 % SOLUTION	Tier 4	[*]
AYR SALINE NASAL DROPS 0.65 % SOLUTION	Tier 4	[*]
CALCIUM CARBONATE 800 MG/2GM POWDER	Tier 4	[*]
<i>cromolyn sodium 5.2 mg/act aero soln</i>	Tier 4	[*]
FANTASY LUBRICATED MISC	Tier 4	[*]
FANTASY LUBRICATED/SPERMICIDE MISC	Tier 4	[*]
GAUZE STERILE PADS 2	Tier 1	MO
INSULIN PEN NEEDLE	Tier 1	QL (200 per 30 days); MO
INSULIN SYRINGE (DISP) U-100 0.3 ML	Tier 1	QL (200 per 30 days); MO
INSULIN SYRINGE (DISP) U-100 1 ML	Tier 1	QL (200 per 30 days); MO
INSULIN SYRINGE (DISP) U-100 1/2 ML	Tier 1	QL (200 per 30 days); MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
KIMONO MICRO THIN PLUS MISC	Tier 4	[*]
KIMONO SENSATION MISC	Tier 4	[*]
KIMONO SENSATION PLUS MISC	Tier 4	[*]
LANCETS ULTRA THIN MISC	Tier 4	[*]
NEEDLES, INSULIN DISP., SAFETY	Tier 1	QL (200 per 30 days); MO
ONETOUCH DELICA LANCETS 30G MISC	Tier 4	[*]
ONETOUCH DELICA LANCETS 33G MISC	Tier 4	[*]
ONETOUCH DELICA PLUS LANCET30G MISC	Tier 4	[*]
ONETOUCH DELICA PLUS LANCET33G MISC	Tier 4	[*]
ONETOUCH ULTRA STRIP	Tier 4	[*]
ONETOUCH VERIO STRIP	Tier 4	[*]
PEAK AIR PEAK FLOW METER DEVICE	Tier 4	[*]
PREMIUM CONDOMS LUBRICATED MISC	Tier 4	[*]
PRODIGY TWIST TOP LANCETS 28G MISC	Tier 4	[*]
<i>qc mineral oil heavy oil</i>	Tier 4	[*]
<i>saline nasal spray 0.65 % solution</i>	Tier 4	[*]
<i>simethicone drops infants 20 mg/0.3ml suspension</i>	Tier 4	[*]
<i>sterile water for irrigation</i>	Tier 2	MO
TRODELVY	Tier 2	PA
TRUSTEX LUB/RIBBED/STUDDDED MISC	Tier 4	[*]
TRUSTEX LUB/SPERMICIDE EX ST MISC	Tier 4	[*]
TRUSTEX LUB/SPERMICIDE XL MISC	Tier 4	[*]
TRUSTEX LUBRICATED MISC	Tier 4	[*]
TRUSTEX LUBRICATED EX LARGE MISC	Tier 4	[*]
TRUSTEX LUBRICATED EXTRA ST MISC	Tier 4	[*]
TRUSTEX LUBRICATED/SPERMICIDE MISC	Tier 4	[*]

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
TRUSTEX RIA LUB/SPERMICIDE MISC	Tier 4	[*]
TRUSTEX RIA LUBRICATED MISC	Tier 4	[*]
TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	Tier 4	[*]
UNILET COMFORTOUCH LANCET MISC	Tier 4	[*]
UNILET GP 28 ULTRA THIN MISC	Tier 4	[*]
UNILET MICRO-THIN 33G MISC	Tier 4	[*]
UNILET SUPER-THIN 30G MISC	Tier 4	[*]
UNILET ULTRA-THIN 28G MISC	Tier 4	[*]
<b>OPHTHALMIC AGENTS</b>		
<i>acetazolamide er</i>	Tier 2	MO
<i>ak-poly-bac</i>	Tier 2	MO
<i>alaway 0.025 % solution</i>	Tier 4	[*]
<i>alaway childrens allergy 0.025 % solution</i>	Tier 4	[*]
ALPHAGAN P 0.1 % SOLUTION	Tier 2	MO
<i>apraclonidine hcl</i>	Tier 2	MO
<i>artificial tears 1.4 % solution</i>	Tier 4	[*]
<i>atropine sulfate 1 % ointment, 1 % solution</i>	Tier 2	MO
<i>azelastine hcl 0.05 % solution</i>	Tier 2	MO
AZOPT	Tier 2	MO
<i>bacitra-neomycin-polymyxin-hc</i>	Tier 2	MO
<i>bacitracin 500 unit/gm ointment</i>	Tier 2	MO
<i>bacitracin-polymyxin b</i>	Tier 2	MO
<i>betaxolol hcl 0.5 % solution</i>	Tier 2	MO
BETIMOL	Tier 2	MO
<i>bimatoprost</i>	Tier 2	MO
BLEPHAMIDE S.O.P.	Tier 2	MO
<i>brimonidine tartrate</i>	Tier 2	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>brinzolamide</i>	Tier 2	MO
BROMSITE	Tier 2	MO
<i>carteolol hcl</i>	Tier 2	MO
COMBIGAN	Tier 2	MO
<i>cromolyn sodium 4 % solution</i>	Tier 2	MO
<i>cyclopentolate hcl 1 % solution</i>	Tier 2	MO
<i>dexamethasone sodium phosphate 0.1 % solution</i>	Tier 2	MO
<i>diclofenac sodium 0.1 % solution</i>	Tier 2	MO
<i>dorzolamide hcl</i>	Tier 2	MO
<i>dorzolamide hcl-timolol mal</i>	Tier 2	MO
<i>erythromycin 5 mg/gm ointment</i>	Tier 2	QL (3.5 per 30 days); MO
<i>fluorometholone</i>	Tier 2	MO
<i>flurbiprofen sodium</i>	Tier 2	MO
<i>gentak</i>	Tier 2	MO
<i>gentamicin sulfate 0.3 % solution</i>	Tier 2	MO
<i>gnp artificial tears 5-6 mg/ml solution</i>	Tier 4	[*]
<i>gnp lubricating plus eye drops 0.5 % solution</i>	Tier 4	[*]
<i>goodsense lubricating eye drop 0.5 % solution</i>	Tier 4	[*]
<i>hm lubricating plus 0.5 % solution</i>	Tier 4	[*]
ILEVRO	Tier 2	MO
ISOPTO ATROPINE	Tier 2	MO
<i>ketorolac tromethamine 0.4 % solution, 0.5 % solution</i>	Tier 2	MO
<i>ketotifen fumarate 0.025 % solution</i>	Tier 4	[*]
<i>latanoprost</i>	Tier 2	MO
<i>levobunolol hcl</i>	Tier 2	MO
<i>lubricating plus eye drops 0.5 % solution</i>	Tier 4	[*]

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
LUMIGAN	Tier 2	MO
<i>methazolamide</i>	Tier 2	MO
<i>moxifloxacin hcl 0.5 % solution</i>	Tier 2	MO
NATACYN	Tier 2	MO
<i>neo-polycin</i>	Tier 2	MO
<i>neo-polycin hc</i>	Tier 2	MO
<i>neomycin-bacitracin zn-polymyx</i>	Tier 2	MO
<i>neomycin-polymyxin-dexameth 0.1 % suspension, 3.5-10000-0.1 ointment, 3.5-10000-0.1 suspension</i>	Tier 2	MO
<i>neomycin-polymyxin-gramicidin</i>	Tier 2	MO
<i>neomycin-polymyxin-hc 3.5-10000-1 suspension</i>	Tier 2	MO
<i>ofloxacin ophth soln 0.3%</i>	Tier 2	MO
<i>olopatadine hcl 0.1 % solution, 0.2 % solution</i>	Tier 2	MO
<i>pilocarpine hcl 1 % solution, 2 % solution, 4 % solution</i>	Tier 2	MO
<i>polycin</i>	Tier 2	MO
<i>polymyxin b-trimethoprim</i>	Tier 2	MO
<i>prednisolone acetate</i>	Tier 2	MO
PREDNISOLONE SODIUM PHOSPHATE 1 % SOLUTION	Tier 2	MO
PROLENSA	Tier 2	MO
RESTASIS	Tier 2	QL (60 per 30 days); MO
RESTASIS MULTIDOSE	Tier 2	QL (5.5 per 28 days); MO
RHOPRESSA	Tier 2	MO
ROCKLATAN	Tier 2	MO
SIMBRINZA	Tier 2	MO
<i>sm eye itch relief 0.025 % solution</i>	Tier 4	[*]
<i>sm lubricant eye drops 0.4-0.3 % solution</i>	Tier 4	[*]

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>sm lubricating tears 0.4-0.3 % solution</i>	Tier 4	[*]
<i>sodium chloride (hypertonic) 5 % ointment, 5 % solution</i>	Tier 4	[*]
<i>sulfacetamide sodium 10 % solution</i>	Tier 2	MO
<i>sulfacetamide-prednisolone</i>	Tier 2	MO
<i>timolol maleate 0.25 % gel f soln, 0.25 % solution, 0.5 % (daily) solution, 0.5 % gel f soln, 0.5 % solution</i>	Tier 2	MO
<i>tobramycin 0.3 % solution</i>	Tier 2	MO
<i>tobramycin-dexamethasone</i>	Tier 2	MO
<i>travoprost (bak free)</i>	Tier 2	MO
VYZULTA	Tier 2	MO
XIIDRA	Tier 2	QL (60 per 30 days); MO
<b>OTIC AGENTS</b>		
<i>ciprofloxacin-dexamethasone</i>	Tier 2	MO
CORTISPORIN-TC	Tier 2	MO
flac	Tier 2	MO
<i>fluocinolone acetonide 0.01 % oil</i>	Tier 2	MO
<i>hydrocortisone-acetic acid</i>	Tier 2	MO
<i>neomycin-polymyxin-hc 1 % solution, 3.5-10000-1 solution</i>	Tier 2	MO
<i>ofloxacin otic soln 0.3%</i>	Tier 2	MO
<b>RESPIRATORY TRACT/PULMONARY AGENTS</b>		
<i>acetylcysteine 10 % solution, 20 % solution</i>	Tier 1	B/D PA; MO
ADEMPAS	Tier 2	PA; LA
ADVAIR HFA	Tier 2	QL (12 per 30 days); MO
<i>albuterol sulfate 0.63 mg/3ml nebu soln, 1.25 mg/3ml nebu soln, (2.5 mg/3ml) 0.083% nebu soln</i>	Tier 1	B/D PA; QL (360 per 30 days); MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>albuterol sulfate 2 mg tab, 2 mg/5ml syrup, 4 mg tab</i>	Tier 1	MO
<i>albuterol sulfate 2.5 mg/0.5ml nebu soln, (5 mg/ml) 0.5% nebu soln</i>	Tier 1	B/D PA; QL (60 per 30 days); MO
<i>albuterol sulfate hfa</i>	Tier 1	MO
<i>all day allergy 10 mg tab</i>	Tier 4	[*]
<i>allergy childrens 12.5 mg/5ml liquid</i>	Tier 4	[*]
<i>allergy relief 10 mg tab, 25 mg cap, 25 mg tab</i>	Tier 4	[*]
<i>allergy relief childrens 12.5 mg/5ml liquid</i>	Tier 4	[*]
<i>ambrisentan</i>	Tier 2	PA; LA; QL (30 per 30 days)
<i>ANORO ELLIPTA</i>	Tier 2	QL (60 per 30 days); MO
<i>aprodine 2.5-60 mg tab</i>	Tier 4	[*]
<i>ARNUITY ELLIPTA</i>	Tier 2	QL (30 per 30 days); MO
<i>ATROVENT HFA</i>	Tier 2	QL (26 per 30 days); MO
<i>azelastine hcl 0.1 % solution, 0.15 % solution, 137 mcg/spray solution</i>	Tier 2	QL (30 per 25 days); MO
<i>banophen 25 mg cap, 25 mg tab, 50 mg cap</i>	Tier 4	[*]
<i>benzonatate 100 mg cap, 200 mg cap</i>	Tier 3	[*]
<i>bosentan</i>	Tier 2	PA; LA; QL (60 per 30 days)
<i>BREO ELLIPTA</i>	Tier 2	QL (60 per 30 days); MO
<i>budesonide 0.25 mg/2ml suspension, 0.5 mg/2ml suspension</i>	Tier 2	B/D PA; QL (120 per 30 days); MO
<i>budesonide 1 mg/2ml suspension</i>	Tier 2	B/D PA; QL (60 per 30 days); MO
<i>carbinoxamine maleate 4 mg/5ml solution</i>	Tier 2	PA; MO
<i>CAYSTON</i>	Tier 2	PA; LA
<i>cetirizine hcl 5 mg tab, 10 mg tab</i>	Tier 4	[*]
<i>chest congestion relief 400 mg tab</i>	Tier 4	[*]
<i>clemastine fumarate 2.68 mg tab</i>	Tier 2	PA; MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
COMBIVENT RESPIMAT	Tier 2	QL (8 per 30 days); MO
<i>complete allergy medicine 25 mg cap</i>	Tier 4	[*]
<i>cromolyn sodium 20 mg/2ml nebu soln</i>	Tier 1	B/D PA; QL (240 per 30 days); MO
<i>ciproheptadine hcl 4 mg tab</i>	Tier 2	MO
DALIRESP	Tier 2	PA; QL (30 per 30 days); MO
<i>diphenhist 25 mg cap</i>	Tier 4	[*]
<i>diphenhydramine hcl 50 mg/ml solution</i>	Tier 2	MO
DIPHENHYDRAMINE HCL 6.25 MG/ML LIQUID, 12.5 MG/5ML LIQUID, 25 MG CAP, 25 MG TAB, 50 MG CAP	Tier 4	[*]
<i>ed a-hist 4-10 mg tab</i>	Tier 4	[*]
<i>epinephrine (anaphylaxis)</i>	Tier 2	MO
<i>epinephrine 0.15 mg/0.3ml soln a-inj, 0.3 mg/0.3ml soln a-inj</i>	Tier 1	QL (2 per 28 days); MO
ESBRIET 267 MG CAP, 267 MG TAB	Tier 2	PA; QL (270 per 30 days)
ESBRIET 801 MG TAB	Tier 2	PA; QL (90 per 30 days)
FLONASE ALLERGY RELIEF 50 MCG/ACT SUSPENSION	Tier 4	[*]
FLOVENT DISKUS 250 MCG/ACT AER POW BA	Tier 2	QL (240 per 30 days); MO
FLOVENT DISKUS 50 MCG/ACT AER POW BA, 100 MCG/ACT AER POW BA	Tier 2	QL (60 per 30 days); MO
FLOVENT HFA 110 MCG/ACT AEROSOL	Tier 2	QL (12 per 30 days); MO
FLOVENT HFA 220 MCG/ACT AEROSOL	Tier 2	QL (24 per 30 days); MO
FLOVENT HFA 44 MCG/ACT AEROSOL	Tier 2	QL (11 per 30 days); MO
<i>flunisolide</i>	Tier 2	QL (75 per 30 days); MO
<i>fluticasone propionate 50 mcg/act suspension</i>	Tier 2	QL (16 per 30 days); MO
<i>fluticasone propionate 50 mcg/act suspension</i>	Tier 4	[*]

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>fluticasone-salmeterol 100-50 mcg/act aer pow ba, 250-50 mcg/act aer pow ba, 500-50 mcg/act aer pow ba</i>	Tier 2	QL (60 per 30 days); MO
<i>gnp all day allergy 10 mg tab</i>	Tier 4	[*]
<i>gnp allergy 25 mg tab</i>	Tier 4	[*]
<i>gnp allergy relief 25 mg cap</i>	Tier 4	[*]
<i>gnp childrens allergy 12.5 mg/5ml liquid</i>	Tier 4	[*]
<i>gnp loratadine 10 mg tab</i>	Tier 4	[*]
<i>gnp mucus er 600 mg tab er 12h</i>	Tier 4	[*]
<i>gnp mucus relief 400 mg tab</i>	Tier 4	[*]
<i>gnp nasal decongestant 30 mg tab</i>	Tier 4	[*]
<i>gnp tab tussin 400 mg tab</i>	Tier 4	[*]
<i>goodsense all day allergy 10 mg tab</i>	Tier 4	[*]
<i>guaiatussin ac 100-10 mg/5ml syrup</i>	Tier 4	[*]
<i>guaifenesin 200 mg tab, 400 mg tab</i>	Tier 4	[*]
<i>guaifenesin ac 100-10 mg/5ml syrup</i>	Tier 4	[*]
<i>guaifenesin er 600 mg tab er 12h, 1200 mg tab er 12h</i>	Tier 4	[*]
<i>guaifenesin-codeine 100-10 mg/5ml solution</i>	Tier 4	[*]
<i>hm chest congestion relief 400 mg tab</i>	Tier 4	[*]
<i>hm mucus relief 600 mg tab er 12h</i>	Tier 4	[*]
<i>hm mucus relief max st 1200 mg tab er 12h</i>	Tier 4	[*]
<i>hydrocod polst-cpm polst er 10-8 mg/5ml susp</i>	Tier 3	[*]
<i>hydrocodone bit-homatrop mbr 5-1.5 mg tab, 5-1.5 mg/5ml solution</i>	Tier 3	[*]
<i>hydromet 5-1.5 mg/5ml solution</i>	Tier 3	[*]
<i>hydroxyzine hcl 10 mg tab, 25 mg tab, 50 mg tab</i>	Tier 2	MO
<i>ipratropium bromide 0.02 % solution</i>	Tier 1	B/D PA; MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>ipratropium bromide 0.03 % solution, 0.06 % solution</i>	Tier 2	QL (30 per 30 days); MO
<i>ipratropium-albuterol</i>	Tier 2	B/D PA; QL (540 per 30 days); MO
KALYDECO 150 MG TAB	Tier 2	PA; QL (60 per 30 days)
<i>levalbuterol hcl 0.31 mg/3ml nebu soln, 1.25 mg/0.5ml nebu soln, 1.25 mg/3ml nebu soln</i>	Tier 1	B/D PA; QL (270 per 30 days); MO
<i>levalbuterol hcl 0.63 mg/3ml nebu soln</i>	Tier 1	B/D PA; QL (540 per 30 days); MO
<i>levalbuterol tartrate</i>	Tier 1	QL (45 per 30 days); MO
<i>levocetirizine dihydrochloride 5 mg tab</i>	Tier 2	MO
<i>loratadine 10 mg tab</i>	Tier 4	[*]
M-CLEAR WC 100-6.3 MG/5ML SOLUTION	Tier 4	[*]
<i>montelukast sodium</i>	Tier 1	MO
<i>mucosa 400 mg tab</i>	Tier 4	[*]
<i>mucus relief 400 mg tab, 600 mg tab er 12h</i>	Tier 4	[*]
<i>mucus relief chest congestion 200 mg tab</i>	Tier 4	[*]
<i>mucus relief er 600 mg tab er 12h</i>	Tier 4	[*]
<i>mucus relief max st 1200 mg tab er 12h</i>	Tier 4	[*]
<i>nasal decongestant 30 mg tab</i>	Tier 4	[*]
NUCALA 40 MG/0.4ML SOLN PRSYR, 100 MG RECON SOLN, 100 MG/ML SOLN A-INJ, 100 MG/ML SOLN PRSYR	Tier 2	PA; LA
OFEV	Tier 2	PA; QL (60 per 30 days)
OPSUMIT	Tier 2	PA; LA; QL (30 per 30 days)
ORKAMBI 100-125 MG TAB, 200-125 MG TAB	Tier 2	PA; QL (120 per 30 days)
<i>pharbedryl 25 mg cap, 50 mg cap</i>	Tier 4	[*]
<i>pirfenidone 267 mg tab</i>	Tier 2	PA; QL (270 per 30 days)
<i>pirfenidone 534 mg tab, 801 mg tab</i>	Tier 2	PA; QL (90 per 30 days)
PROAIR HFA	Tier 1	MO

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
PROAIR RESPICLICK	Tier 1	MO
<i>promethazine-codeine 6.25-10 mg/5ml solution, 6.25-10 mg/5ml syrup</i>	Tier 3	[*]
<i>promethazine-dm 6.25-15 mg/5ml syrup</i>	Tier 3	[*]
<i>promethazine-phenyleph-codeine 6.25-5-10 mg/5ml syrup</i>	Tier 3	[*]
<i>pseudoephedrine hcl 30 mg tab</i>	Tier 4	[*]
PULMOZYME	Tier 2	B/D PA
<i>qc all day allergy 10 mg tab</i>	Tier 4	[*]
<i>qc loratadine allergy relief 10 mg tab</i>	Tier 4	[*]
<i>qc medifin 400 400 mg tab</i>	Tier 4	[*]
<i>qc mucus relief 600 mg tab er 12h</i>	Tier 4	[*]
<i>qc mucus relief er 1200 mg tab er 12h</i>	Tier 4	[*]
<i>qc mucus relief max st 1200 mg tab er 12h</i>	Tier 4	[*]
QVAR REDIHALER 40 MCG/ACT AERO BA	Tier 2	QL (11 per 30 days); MO
QVAR REDIHALER 80 MCG/ACT AERO BA	Tier 2	QL (22 per 30 days); MO
<i>sb allergy 10 mg tab</i>	Tier 4	[*]
<i>sb coughtab 200 mg tab</i>	Tier 4	[*]
<i>sb loratadine 10 mg tab</i>	Tier 4	[*]
SEREVENT DISKUS	Tier 2	QL (60 per 30 days); MO
<i>siladryl allergy 12.5 mg/5ml liquid</i>	Tier 4	[*]
<i>sildenafil citrate 20 mg tab</i>	Tier 2	PA; QL (90 per 30 days)
<i>sm all day allergy 10 mg tab</i>	Tier 4	[*]
<i>sm allergy relief 1.34 mg tab, 12.5 mg/5ml liquid</i>	Tier 4	[*]
<i>sm chest congestion relief 400 mg tab</i>	Tier 4	[*]
<i>sm loratadine 10 mg tab</i>	Tier 4	[*]
<i>sm mucus relief 600 mg tab er 12h</i>	Tier 4	[*]
<i>sm mucus relief max strength 1200 mg tab er 12h</i>	Tier 4	[*]

Makakahanap kayo ng impormasyon tungkol sa kahulugan ng mga simbolo at abbreviation sa talahanayang ito sa pamamagitan ng pagsangguni sa Legend sa *pahina 15*.

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
SPIRIVA HANDIHALER	Tier 2	QL (30 per 30 days); MO
SPIRIVA RESPIMAT	Tier 2	QL (4 per 30 days); MO
STIOLTO RESPIMAT	Tier 2	QL (4 per 30 days); MO
<i>sudogest 30 mg tab, 60 mg tab</i>	Tier 4	[*]
<i>sudogest sinus/allergy 4-60 mg tab</i>	Tier 4	[*]
SYMBICORT	Tier 2	QL (30.6 per 30 days); MO
<i>terbutaline sulfate 1 mg/ml solution, 2.5 mg tab, 5 mg tab</i>	Tier 1	MO
<i>theophylline er</i>	Tier 2	MO
<i>tobramycin 300 mg/5ml nebu soln</i>	Tier 2	B/D PA; QL (280 per 28 days)
TRACLEER 32 MG TAB SOL	Tier 2	PA; LA; QL (120 per 30 days)
TRELEGY ELLIPTA	Tier 2	QL (60 per 30 days); MO
UPTRAVI 200 & 800 MCG TAB THPK	Tier 2	PA; LA
UPTRAVI 200 MCG TAB, 400 MCG TAB, 600 MCG TAB, 800 MCG TAB, 1000 MCG TAB, 1200 MCG TAB, 1400 MCG TAB, 1600 MCG TAB	Tier 2	PA; LA; QL (60 per 30 days)
VENTAVIS	Tier 2	PA; QL (270 per 30 days)
VENTOLIN HFA	Tier 1	MO
<i>virtussin a/c 100-10 mg/5ml solution</i>	Tier 4	[*]
<i>wixela inhub</i>	Tier 2	QL (60 per 30 days); MO
<i>zafirlukast</i>	Tier 1	MO
<b>SKELETAL MUSCLE RELAXANTS</b>		
<i>carisoprodol 350 mg tab</i>	Tier 2	MO
<i>cyclobenzaprine hcl</i>	Tier 2	PA; MO
<i>methocarbamol 500 mg tab, 750 mg tab</i>	Tier 2	MO
<b>SLEEP DISORDER AGENTS</b>		
<i>acetaminophen pm 500-25 mg tab</i>	Tier 4	[*]
HETLIOZ	Tier 2	PA; LA; QL (30 per 30 days)

Pangalan ng Gamot	Magkano ang Gagastusin Ninyo sa Gamot (Antas ng Baitang)	Mga Kinakailangang Pagkilos, Paghihigpit o Limitasyon sa Paggamit
<i>modafinil 100 mg tab</i>	Tier 2	PA; MO
<i>modafinil 200 mg tab</i>	Tier 2	PA; QL (60 per 30 days); MO
<i>ramelteon</i>	Tier 2	QL (30 per 30 days); MO
<i>temazepam 15 mg cap, 30 mg cap</i>	Tier 2	QL (30 per 30 days); MO
<i>XYREM</i>	Tier 2	PA; LA; QL (540 per 30 days)
<i>zaleplon 10 mg cap</i>	Tier 2	QL (60 per 30 days); MO
<i>zaleplon 5 mg cap</i>	Tier 2	QL (30 per 30 days); MO
<i>zolpidem tartrate 5 mg tab, 10 mg tab</i>	Tier 2	QL (30 per 30 days); MO

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Kung may mga tanong kayo, pakitawagan ang Anthem Blue Cross Cal MediConnect Plan sa 1-833-370-7466 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo. Libre ang tawag. Para sa higit pang impormasyon, bisitahin ang [duals.anthem.com](http://duals.anthem.com).

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<i>atropine sulfate 1 %</i>	<b>B</b>	<i>INJ, 200 MG/ML SOLN</i>
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<i>aurovela 1/20 .....</i>	<i>b-6 100 mg tab .....</i>	<i>erythromycin .....</i>
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<i>AUSTEDO .....</i>	<i>ointment .....</i>	<i>mg tab, 1 mg tab, 2 mg</i>
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<i>0.65 % SOLUTION .....</i>	<i>balsalazide</i>	<i>ointment .....</i>
<i>ayuna .....</i>	<i>disodium .....</i>	<i>betamethasone</i>
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<i>tab .....</i>	<i>balziva .....</i>	<i>betamethasone</i>
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bisoprolol fumarate ..... 70	tab, 2 mg tab ..... 70	c-250 250 mg tab ..... 83
bisoprolol-	buprenorphine hcl 0.3 mg/	c-500 500 mg tab ..... 83
hydrochlorothiazide ..... 70	ml solution ..... 21	c-500/rose hips 500 mg
BLENREP ..... 41	buprenorphine hcl 2 mg sl	tab ..... 83
bleomycin sulfate ..... 41	tab ..... 21	CABENUVA 400 & 600 MG/
BLEPHAMIDE S.O.P. .... 121	buprenorphine hcl 8 mg sl	2ML SUSP ..... 58
BLINCYTO ..... 41	tab ..... 21	CABENUVA 600 & 900 MG/
blisovi fe 1.5/30 ..... 104	buprenorphine hcl-	3ML SUSP ..... 58
blisovi fe 1/20 ..... 104	naloxone hcl 2-0.5 mg sl	cabergoline ..... 111
BOOSTRIX ..... 112	tab ..... 21	CABOMETYX ..... 41
BORTEZOMIB , 3.5 MG	buprenorphine hcl-	cal-gest antacid 500 mg
RECON SOLN ..... 41	naloxone hcl 8-2 mg sl	chew tab ..... 93
bosentan ..... 125	tab ..... 21	CALAMINE 8-8 %
BOSULIF 100 MG TAB .... 41	bupropion hcl 100 mg	LOTION ..... 79
BOSULIF 400 MG TAB, 500	tab ..... 32	calcipotriene 0.005 %
MG TAB ..... 41	bupropion hcl 75 mg	cream, 0.005 %
BRAFTOVI ..... 41	tab ..... 32	ointment ..... 79
BREO ELLIPTA ..... 125	bupropion hcl er (smoking	calcipotriene 0.005 %
brielllyn ..... 105	det) ..... 21	solution ..... 79
BRILINTA ..... 67	bupropion hcl er (sr) 100	calcitonin (salmon) 200
brimonidine tartrate .... 121	mg tab er 12h ..... 33	unit/act solution ..... 117
brinzolamide ..... 122	bupropion hcl er (sr) 150	calcitonin (salmon) 200
BRIVIACT 10 MG TAB, 25 MG	mg tab er 12h, 200 mg tab	unit/ml solution ..... 117
TAB, 50 MG TAB, 75 MG TAB,	er 12h ..... 33	calcitrate 950 (200 ca) mg
100 MG TAB ..... 28	bupropion hcl er (xl) 150	tab ..... 83
	mg tab er 24h ..... 33	calcitrene ..... 79

calcitriol 0.25 mcg cap, 0.5 mcg cap .....	117	calcium carbonate antacid 1250 mg/5ml suspension .....	84	CALCIUM/C/D 500-10-250 MG-MG-UNIT CHEW TAB .....	85
calcitriol inj 1 mcg/ml .....	117	CALCIUM CARBONATE ANTACID 500 MG CHEW TAB, 648 MG TAB .....	93	CALQUENCE 100 MG CAP .....	41
CALCIUM 1000 + D 1000-20 MG-MCG TAB .....	83	calcium carbonate-vitamin d 500-5 tab, 600-5 tab .....	84	CALTRATE 600+D3 600-20 MG-MCG TAB .....	85
calcium 500 + d 500-3.125 mg-mcg tab .....	83	calcium citrate + d3 maximum 315-250 mg-unit tab .....	84	CALTRATE 600+D3 SOFT 600-20 MG-MCG CHEW TAB .....	85
calcium 500 + d3 500-15 mg-mcg tab .....	83	calcium citrate 250 mg tab, 760 mg/3.5gm granules, 950 (200 ca) mg tab .....	84	camila .....	105
CALCIUM 500-2.5 MG-MCG CHEW TAB .....	83	CALCIUM CITRATE MALATE-VIT D 250-2.5 MG-MCG TAB .....	84	candesartan cilexetil ....	70
calcium 500/vitamin d 500-3.125 mg-mcg tab .....	83	calcium citrate+d3 petites 200-6.25 mg-mcg tab .....	84	candesartan cilexetil-hctz .....	70
calcium 600 1500 (600 ca) mg tab .....	83	calcium citrate-vitamin d 200-3.125 tab, 315-5 tab, 315-6.25 tab .....	84	CAPEX .....	79
calcium 600+d 600-20 tab, 600-5 tab .....	83	CALCIUM CITRATE-VITAMIN D3 1000-0.01 MG/30ML LIQUID .....	84	CAPLYTA .....	54
calcium 600+d3 600-20 mg-mcg tab .....	83	calcium citrate-vitamin d3 315-6.25 mg-mcg tab .....	84	CAPRELSA 100 MG TAB .....	41
calcium 600/vitamin d 600-10 mg-mcg tab .....	83	CALCIUM GLUCONATE 50 MG TAB .....	84	CAPRELSA 300 MG TAB .....	41
calcium 600/vitamin d3 600-20 mg-mcg tab .....	83	calcium high potency 1500 (600 ca) mg tab .....	84	CARBAGLU .....	85
CALCIUM ACETATE 668 (169 CA) MG TAB .....	84	calcium high potency/vitamin d 600-5 mg-mcg tab .....	84	carbamazepine 100 mg chew tab, 100 mg/5ml suspension, 200 mg tab .....	29
calcium acetate (phos binder) 667 mg cap .....	84	CALCIUM LACTATE 100 MG TAB .....	84	carbamazepine er .....	29
calcium antacid 500 mg chew tab .....	93	CALCIUM PLUS D3 ABSORBABLE 600-62.5 MG-MCG CAP .....	84	carbidopa .....	53
calcium antacid extra strength 750 mg chew tab .....	93	calcium+d3 600-20 mg-mcg tab .....	84	carbidopa-levodopa .....	53
calcium carb-cholecalciferol 600-10 tab, 600-5 tab .....	84	calcium-vitamin d3 250-3.125 mg-mcg tab .....	85	carbidopa-levodopa-entacapone .....	53
CALCIUM CARBONATE 260 MG CHEW TAB, 1250 (500 CA) MG TAB, 1500 (600 CA) MG TAB .....	84			carbinoxamine maleate 4 mg/5ml solution .....	125
CALCIUM CARBONATE 800 MG/2GM POWDER .....	119			carboplatin .....	41

cefaclor 125 mg/5ml recon susp, 250 mg cap, 250 mg/5ml recon susp, 375 mg/5ml recon susp, 500 mg cap .....	24	ceftriaxone sodium for inj 1 gm .....	24	solution, 50 mg tab, 50 mg/2ml solution, 100 mg tab, 200 mg tab .....	54
CEFACLOR ER .....	24	ceftriaxone sodium for inj 2 gm .....	24	CHLORPROMAZINE HCL 30 MG/ML CONC, 100 MG/ML CONC .....	54
cefadroxil 1 gm tab, 250 mg/5ml recon susp, 500 mg cap, 500 mg/5ml recon susp .....	24	ceftriaxone sodium in dextrose .....	24	chlorthalidone .....	70
cefazolin sodium 1 gm recon soln, 2 gm recon soln, 10 gm recon soln, 100 gm recon soln, 300 gm recon soln, 500 mg recon soln .....	24	CEFTRIAXONE SODIUM-DEXTROSE .....	24	cholestyramine 4 gm packet, 4 gm/dose powder .....	70
CEFAZOLIN SODIUM-DEXTROSE 1-4 GM-%(50ML) RECON SOLN, 1-4 GM/50ML-% SOLUTION .....	24	cefuroxime axetil .....	24	cholestyramine light 4 gm packet, 4 gm/dose powder .....	70
cefdinir 125 mg/5ml recon susp, 250 mg/5ml recon susp, 300 mg cap .....	24	cefuroxime sodium .....	24	ciclodan 8 % solution ....	79
cefepime hcl 1 gm recon soln, 2 gm recon soln ....	24	celecoxib .....	16	ciclopirox 0.77 % gel, 1 % shampoo, 8 % solution .....	79
cefoxitin sodium .....	24	CELONTIN .....	29	ciclopirox olamine 0.77 % cream .....	36
CEFOXITIN SODIUM-DEXTROSE .....	24	cephalexin 125 mg/5ml recon susp, 250 mg cap, 250 mg/5ml recon susp, 500 mg cap .....	25	ciclopirox olamine 0.77 % suspension .....	36
cefpodoxime proxetil 50 mg/5ml recon susp, 100 mg tab, 100 mg/5ml recon susp, 200 mg tab .....	24	CERDELGA .....	101	cilostazol .....	67
cefprozil 125 mg/5ml recon susp, 250 mg tab, 250 mg/5ml recon susp, 500 mg tab .....	24	CEREZYME .....	101	CIMDUO .....	58
ceftazidime .....	24	cetirizine hcl 5 mg tab, 10 mg tab .....	125	cimetidine 300 mg tab, 400 mg tab, 800 mg tab .....	93
ceftriaxone sodium 1 gm recon soln, 2 gm recon soln, 10 gm recon soln, 100 gm recon soln, 250 mg recon soln, 500 mg recon soln .....	24	CHANTIX 0.5 MG TAB ....	21	cinacalcet hcl 30 mg tab, 60 mg tab .....	117
chloramphenicol sod succinate .....	25	CHANTIX 1 MG TAB ....	22	cinacalcet hcl 90 mg tab .....	118
chlorhexidine gluconate .....	78	CHANTIX CONTINUING MONTH PAK .....	22	CINRYZE .....	112
chloroquine phosphate .....	52	CHANTIX STARTING MONTH PAK .....	22	ciprofloxacin hcl 0.3 % solution, 250 mg tab, 500 mg tab, 750 mg tab .....	25
chlorpromazine hcl 10 mg tab, 25 mg tab, 25 mg/ml .....	33	chateal .....	105	ciprofloxacin in d5w 200 mg/100ml solution .....	25
citalopram hydrobromide 10 mg tab .....	33	chateal eq .....	105	ciprofloxacin-dexamethasone .....	124
citalopram hydrobromide 10 mg/5ml solution .....	33	CHELATED CALCIUM 200 MG TAB .....	85	cisplatin .....	42
citalopram hydrobromide 20 mg tab .....	33	chest congestion relief 400 mg tab .....	125	citalopram hydrobromide 10 mg tab .....	33

citalopram hydrobromide	CLINIMIX/DEXTROSE (4.25/	clopidogrel bisulfate 75 mg
40 mg tab .....	10) ..... 85	tab ..... 67
cladribine .....	CLINIMIX/DEXTROSE (4.25/	clorazepate
claravis .....	5) ..... 85	dipotassium .....
clarithromycin 125 mg/5ml	CLINIMIX/DEXTROSE (5/	clotrimazole 1 % cream, 1
recon susp, 250 mg tab,	15) ..... 85	% solution .....
250 mg/5ml recon susp,	CLINIMIX/DEXTROSE (5/	clotrimazole 1 % cream, 1
500 mg tab .....	20) ..... 85	% solution .....
clarithromycin er .....	CLINIMIX/DEXTROSE (6/	clotrimazole 10 mg
CLASSIC PRENATAL 28-0.8	5) ..... 85	troche .....
MG TAB .....	CLINIMIX/DEXTROSE (8/	clotrimazole anti-fungal 1
clearlax 17 gm/scoop	10) ..... 85	% cream .....
powder .....	CLINIMIX/DEXTROSE (8/	clotrimazole-
clemastine fumarate 2.68	14) ..... 85	betamethasone 1-0.05 %
mg tab .....	CLINOLIPID ..... 85	cream .....
clindacin etz .....	clobazam 10 mg tab .... 29	clozapine 100 mg tab, 100
clindacin-p .....	clobazam 2.5 mg/ml	mg tab disp .....
clindamycin hcl .....	suspension .....	clozapine 12.5 mg tab
clindamycin phosphate 1	clobazam 20 mg tab .... 29	disp .....
% foam .....	clobetasol prop emollient	clozapine 150 mg tab
clindamycin phosphate 1	base .....	disp .....
% gel .....	clobetasol propionate 0.05	clozapine 200 mg tab, 200
clindamycin phosphate 1	% cream .....	mg tab disp .....
% lotion, 1 % solution ...	clobetasol propionate 0.05	clozapine 25 mg tab, 25 mg
clindamycin phosphate 1	% solution .....	tab disp .....
% swab, 2 % cream, 9 gm/	clobetasol propionate	clozapine 50 mg tab .... 54
60ml solution, 300 mg/2ml	e .....	COARTEM .....
solution, 600 mg/4ml	clofarabine .....	colchicine .....
solution, 9000 mg/60ml	clomipramine hcl .....	colchicine-
solution .....	clonazepam 0.125 mg tab	probenecid .....
CLINIMIX E/DEXTROSE	disp .....	colestipol hcl 1 gm tab, 5
(2.75/5) .....	clonazepam 0.25 mg tab	gm granules, 5 gm
CLINIMIX E/DEXTROSE	disp .....	packet .....
(4.25/10) .....	clonazepam 0.5 mg tab, 0.5	colistimethate sodium
CLINIMIX E/DEXTROSE	mg tab disp .....	(cba) .....
(4.25/5) .....	clonazepam 1 mg tab, 1 mg	COMBIGAN .....
CLINIMIX E/DEXTROSE (5/	tab disp .....	COMBIVENT
15) .....	clonazepam 2 mg tab, 2 mg	RESPIMAT .....
CLINIMIX E/DEXTROSE (5/	tab disp .....	COMETRIQ (100 MG DAILY
20) .....	clonidine .....	DOSE) .....
CLINIMIX E/DEXTROSE (8/	clonidine hcl .....	COMETRIQ (140 MG DAILY
10) .....	clopidogrel bisulfate 300	DOSE) .....
CLINIMIX E/DEXTROSE (8/	mg tab .....	COMETRIQ (60 MG DAILY
14) .....	67	DOSE) .....



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COMPLERA .....	58	cyclopentolate hcl 1 % solution .....	122	dalfampridine er .....	77
<i>complete allergy medicine</i>				DALIRESP .....	126
25 mg cap .....	126			danazol .....	105
<i>compro</i> .....	35			dantrolene sodium .....	57
<i>constulose</i> .....	94			dapsone 25 mg tab, 100 mg tab .....	39
COPAXONE 20 MG/ML				DAPTACEL .....	113
SOLN PRSYR .....	77			DAPTOMYCIN , 350 MG	
COPAXONE 40 MG/ML				RECON SOLN .....	25
SOLN PRSYR .....	77			DARZALEX .....	42
COPIKTRA .....	42			DARZALEX FASPRO .....	42
CORLANOR 5 MG TAB, 7.5 MG TAB .....	70			dasetta 1/35 .....	105
CORLANOR 5 MG/5ML SOLUTION .....	70			dasetta 7/7/7 .....	105
CORTISPORIN-TC .....	124			daunorubicin hcl 20 mg/ 4ml solution, 50 mg/10ml solution .....	42
COSENTYX 150 MG/ML SOLN PRSYR .....	112			DAURISMO 100 MG TAB .....	42
COSENTYX 75 MG/0.5ML SOLN PRSYR .....	112			DAURISMO 25 MG TAB .....	42
COSENTYX SENSOREADY PEN .....	112			deblitane .....	105
COSENTYX SENSOREADY (300 MG) .....	112			decitabine .....	42
COSENTYX (300 MG DOSE) .....	112			deferasirox 125 mg tab sol, 250 mg tab sol, 500 mg tab sol .....	86
COTELLIC .....	42			DELSTRIGO .....	58
CREON .....	101			delta d3 10 mcg (400 unit) tab .....	118
CRIXIVAN 200 MG CAP ...	58			delyla .....	105
CRIXIVAN 400 MG CAP ...	58			demeclocycline hcl .....	25
<i>cromolyn sodium 100 mg/ 5ml conc</i> .....	101			DENAVIR .....	80
<i>cromolyn sodium 20 mg/ 2ml nebu soln</i> .....	126			DESCOVERY .....	58
<i>cromolyn sodium 4 % solution</i> .....	122			desipramine hcl .....	33
<i>cromolyn sodium 5.2 mg/ act aero soln</i> .....	119			desmopressin ace spray refrig .....	103
<i>cryselle-28</i> .....	105			desmopressin acetate 0.1 mg tab, 0.2 mg tab, 4 mcg/ ml solution .....	103
<i>cyanocobalamin 1000 mcg/ml solution</i> .....	85			desmopressin acetate pf .....	103
<i>cyclafem 1/35</i> .....	105			desmopressin acetate spray .....	103
<i>cyclafem 7/7/7</i> .....	105			desogestrel-ethinyl estradiol .....	105
<i>cyclobenzaprine hcl</i> ....	130				

desoximetasone 0.05 % cream, 0.25 % cream ....	80	dextrose ..... 86	
desoximetasone 0.05 % gel, 0.05 % ointment, 0.25 % ointment .....	80	dextrose in lactated ringers ..... 86	
DESVENLAFAXINE ER ....	33	dextrose-nacl 2.5-0.45 % solution, 5-0.2 % solution, 5-0.33 % solution, 5-0.45 % solution, 5-0.9 % solution, 10-0.2 % solution, 10-0.45 % solution .....	86
desvenlafaxine succinate er .....	33	dextrose-sodium chloride 5-0.225 % solution, 5-0.3 % solution, 5-0.45 % solution, 5-0.9 % solution .....	86
DEX4 4-6 GM-MG CHEW TAB .....	63	DIACOMIT 250 MG CAP, 250 MG PACKET .....	29
DEX4 GLUCOSE 4-6 GM-MG CHEW TAB, 15 GM/59ML LIQUID .....	63	DIACOMIT 500 MG CAP, 500 MG PACKET .....	29
DEX4 GLUCOSE GO-POUCH 15 GM/33GM GEL.....	63	dialyvite vitamin d 5000 125 mcg (5000 ut) cap .....	118
dexamethasone 0.5 mg tab, 0.5 mg/5ml elixir, 0.5 mg/5ml solution, 0.75 mg tab, 1 mg tab, 1.5 mg tab, 2 mg tab, 4 mg tab, 6 mg tab .....	102	diazepam 10 mg tab .....	62
dexamethasone sod phosphate pf 10 mg/ml solution .....	102	diazepam 2 mg tab .....	62
dexamethasone sodium phosphate 0.1 % solution .....	122	diazepam 2.5 mg gel, 10 mg gel, 20 mg gel .....	29
dexamethasone sodium phosphate 4 mg/ml solution, 10 mg/ml solution, 20 mg/5ml solution, 100 mg/10ml solution, 120 mg/30ml solution .....	103	diazepam 5 mg tab, 5 mg/ml conc .....	62
dexrazoxane hcl .....	42	diazepam 5 mg/5ml solution .....	62
dextroamphetamine sulfate 10 mg tab .....	77	diazepam 5 mg/ml solution .....	62
dextroamphetamine sulfate 5 mg tab .....	77	diazepam intensol .....	62
dextroamphetamine sulfate er 15 mg cap er 24h .....	77	diazoxide .....	63
dextroamphetamine sulfate er 5 mg cap er 24h, 10 mg cap er 24h .....	77	diclofenac potassium 50 mg tab .....	16
		diclofenac sodium 0.1 % solution .....	122
		diclofenac sodium 1 % gel .....	16
		diclofenac sodium 1 % gel .....	17
		diclofenac sodium 25 mg tab dr, 50 mg tab dr, 75 mg tab dr .....	17
		diclofenac sodium er ....	17
		dicloxacillin sodium .....	25
		dicyclomine hcl 10 mg cap, 10 mg/5ml solution, 20 mg tab .....	94
		diflunisal .....	17
		digitek 125 mcg tab .....	71
		digitek 250 mcg tab .....	71
		digox 125 mcg tab .....	71
		digox 250 mcg tab .....	71
		digoxin 0.05 mg/ml solution, 62.5 mcg tab, 125 mcg tab .....	71
		digoxin 250 mcg tab .....	71
		dihydroergotamine mesylate 4 mg/ml solution .....	39
		DILANTIN 30 MG CAP, 100 MG CAP .....	29
		DILANTIN INFATABS .....	29
		dilt-xr .....	71
		diltiazem hcl 30 mg tab, 60 mg tab, 90 mg tab, 120 mg tab .....	71
		diltiazem hcl er .....	71
		diltiazem hcl er beads 120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h, 360 mg cap er 24h .....	71
		diltiazem hcl er coated beads 120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h .....	71
		diltiazem hcl er coated beads 360 mg cap er 24h .....	71
		diphenhist 25 mg cap .....	126
		diphenhydramine hcl 50 mg/ml solution .....	126
		DIPHENHYDRAMINE HCL 6.25 MG/ML LIQUID, 12.5 MG/5ML LIQUID, 25 MG	



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CAP, 25 MG TAB, 50 MG	<i>doxorubicin hcl 2 mg/ml solution</i> ..... 43	<i>dutasteride</i> ..... 101
CAP ..... 126	<i>doxorubicin hcl 50 mg recon soln</i> ..... 43	<i>dutasteride-tamsulosin hcl</i> ..... 101
<i>diphenoxylate-atropine 2.5-0.025 mg tab, 2.5-0.025 mg/5ml liquid</i> ..... 94	<i>doxorubicin hcl liposomal</i> ..... 43	<b>E</b>
DIPHTHERIA-TETANUS TOXOIDS DT ..... 113	<i>doxy 100</i> ..... 25	<i>e.e.s. 400</i> ..... 25
<i>disulfiram</i> ..... 22	<i>doxycycline hyclate 20 mg tab, 50 mg cap, 100 mg cap, 100 mg recon soln, 100 mg tab</i> ..... 25	<i>ec-naproxen</i> ..... 17
<i>divalproex sodium</i> ..... 29	<i>doxycycline monohydrate 50 mg cap, 50 mg tab, 75 mg cap, 100 mg cap, 100 mg tab</i> ..... 25	<i>econtra ez 1.5 mg tab</i> ..... 105
<i>divalproex sodium er</i> ..... 29	<i>dramamine less drowsy 25 mg tab</i> ..... 35	<i>ed a-hist 4-10 mg tab</i> ..... 126
DOCETAXEL 20 MG/2ML SOLUTION, 80 MG/8ML	<i>DRIZALMA SPRINKLE 20 MG CAP DR, 60 MG CAP</i> ..... 77	<b>EDURANT</b> ..... 58
SOLUTION, 160 MG/16ML	<i>DRIZALMA SPRINKLE 30 MG CAP DR, 40 MG CAP</i> ..... 77	<i>efavirenz 200 mg cap</i> ..... 58
SOLUTION ..... 42	<i>dronabinol</i> ..... 35	<i>efavirenz 50 mg cap</i> ..... 58
<i>docetaxel 20 mg/ml conc, 80 mg/4ml conc, 160 mg/8ml conc</i> ..... 43	<i>drospirenone-ethynodiol 3-0.03 mg tab</i> ..... 105	<i>efavirenz 600 mg tab</i> ..... 58
<i>docosanol 10 % cream</i> ..... 58	<i>DROXIA</i> ..... 43	<i>efavirenz-emtricitab-tenofovir</i> ..... 58
<i>docu 50 mg/5ml liquid</i> ..... 94	<i>droxidopa 100 mg cap</i> ..... 71	<i>efavirenz-lamivudine-tenofovir</i> ..... 58
<i>docusate calcium 240 mg cap</i> ..... 94	<i>droxidopa 200 mg cap, 300 mg cap</i> ..... 71	<b>ELAPRASE</b> ..... 101
<i>docusate sodium 50 mg/5ml liquid, 100 mg cap, 250 mg cap</i> ..... 94	<i>DUAVEE</i> ..... 105	<i>elinest</i> ..... 105
<i>dofetilide</i> ..... 71	<i>dulcolax 1200 mg/15ml suspension</i> ..... 94	<b>ELIQUIS</b> ..... 68
<i>dok 100 mg cap</i> ..... 94	<i>duloxetine hcl 20 mg cp dr part</i> ..... 77	<b>ELIQUIS DVT/PE STARTER PACK</b> ..... 68
<i>donepezil hcl 5 mg tab, 5 mg tab disp, 10 mg tab, 10 mg tab disp</i> ..... 32	<i>duloxetine hcl 30 mg cp dr part</i> ..... 77	<b>ELITEK</b> ..... 43
<i>dorzolamide hcl</i> ..... 122	<i>duloxetine hcl 40 mg cp dr part</i> ..... 77	<b>ELLA</b> ..... 105
<i>dorzolamide hcl-timolol mal</i> ..... 122	<i>duloxetine hcl 60 mg cp dr part</i> ..... 77	<i>eluryng</i> ..... 105
DOVATO ..... 58	<i>duramorph</i> ..... 17	<b>EMCYT</b> ..... 43
<i>doxazosin mesylate</i> ..... 71		<b>EMGALITY</b> ..... 39
<i>doxepin hcl 10 mg cap, 10 mg/ml conc, 25 mg cap, 50 mg cap, 75 mg cap, 100 mg cap, 150 mg cap</i> ..... 33		<b>EMGALITY (300 MG DOSE)</b> ..... 39
<i>doxercalciferol 0.5 mcg cap</i> ..... 118		<i>emoquette</i> ..... 105
<i>doxorubicin hcl 10 mg recon soln</i> ..... 43		<b>EMPLICITI</b> ..... 43



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ENBREL 25 MG RECON SOLN, 50 MG/ML SOLN PRSYR ..... 113	epinephrine (anaphylaxis) ..... 126	erythromycin ethylsuccinate 400 mg tab ..... 26
ENBREL 25 MG/0.5ML SOLN PRSYR ..... 113	epirubicin hcl ..... 43	erythromycin lactobionate ..... 26
ENBREL 25 MG/0.5ML SOLUTION ..... 113	epitol ..... 29	erythromycin stearate ..... 26
ENBREL MINI ..... 113	EPIVIR HBV 5 MG/ML SOLUTION ..... 58	ESBRIET 267 MG CAP, 267 MG TAB ..... 126
ENBREL SURECLICK .... 113	eplerenone ..... 71	ESBRIET 801 MG TAB ..... 126
endocet ..... 17	EPRONTIA ..... 29	escitalopram oxalate 10 mg tab ..... 33
enema mineral oil	eq antacid maximum strength 400-400-40 mg/ 5ml suspension ..... 94	escitalopram oxalate 20 mg tab ..... 33
enema ..... 94	eq pain reliever 325 mg tab ..... 17	escitalopram oxalate 5 mg tab ..... 33
ENGERIX-B ..... 113	ERAXIS 100 MG RECON SOLN ..... 37	escitalopram oxalate 5 mg/ 5ml solution ..... 33
ENHERTU ..... 43	ERBITUX ..... 43	estarrylla ..... 105
exoxaparin sodium 100 mg/ml soln prsy, 150 mg/ ml soln prsy ..... 68	ergoloid mesylates ..... 32	estradiol 0.025 mg/24hr patch wk, 0.0375 mg/24hr
exoxaparin sodium 30 mg/ 0.3ml soln prsy ..... 68	ERGOMAR ..... 39	patch wk, 0.05 mg/24hr
exoxaparin sodium 300 mg/3ml solution ..... 68	ergotamine-caffeine ..... 39	patch wk, 0.06 mg/24hr
exoxaparin sodium 40 mg/ 0.4ml soln prsy ..... 68	ERIVEDGE ..... 43	patch wk, 0.075 mg/24hr
exoxaparin sodium 60 mg/ 0.6ml soln prsy ..... 68	ERLEADA ..... 43	patch wk, 0.1 mg/24hr
exoxaparin sodium 80 mg/ 0.8ml soln prsy, 120 mg/ 0.8ml soln prsy ..... 68	erlotinib hcl 100 mg tab, 150 mg tab ..... 43	patch wk ..... 106
enpresso-28 ..... 105	erlotinib hcl 25 mg tab ..... 43	estradiol 0.1 mg/gm cream, 0.5 mg tab, 1 mg tab, 2 mg tab ..... 106
enskyce ..... 105	errin ..... 105	ESTRING ..... 106
entacapone ..... 53	ertapenem sodium ..... 25	ethambutol hcl ..... 39
entecavir ..... 58	ery ..... 80	ethosuximide 250 mg cap, 250 mg/5ml solution .... 29
ENTRESTO ..... 71	ery-tab ..... 25	ethynodiol diac-eth estradiol ..... 106
enulose ..... 94	erythrocin	etodolac ..... 17
EPCLUSA 150-37.5 MG PACKET, 400-100 MG TAB ..... 58	lactobionate ..... 25	etongestrel-ethinyl estradiol ..... 106
EPCLUSA 200-50 MG PACKET, 200-50 MG TAB ..... 58	erythrocin stearate ..... 25	ETOPOPHOS ..... 43
EPIDIOLEX ..... 29	erythromycin 2 % gel, 2 % solution ..... 80	etoposide ..... 43
epinephrine 0.15 mg/0.3ml soln a-inj, 0.3 mg/0.3ml soln a-inj ..... 126	erythromycin 250 mg tab dr, 333 mg tab dr, 500 mg tab dr ..... 26	etravirine 100 mg tab .... 59
	erythromycin 5 mg/gm ointment ..... 122	etravirine 200 mg tab .... 59
	erythromycin base 250 mg tab dr, 333 mg tab dr, 500 mg tab dr ..... 26	euthyrox ..... 111

everolimus 0.25 mg tab, 0.5 mg tab, 0.75 mg tab ....	113	felbamate 400 mg tab, 600 mg tab, 600 mg/5ml suspension .....	29	ferrous sulfate 75 (15 fe) mg/ml solution, 220 (44 fe) mg/5ml elixir, 220 (44 fe) mg/5ml liquid, 300 (60 fe) mg/5ml syrup, 324 (65 fe) mg tab dr, 325 (65 fe) mg tab dr .....	86
everolimus 1 mg tab ...	113	felodipine er .....	71	fesoterodine fumarate er .....	101
everolimus 2 mg tab sol, 2.5 mg tab, 3 mg tab sol, 5 mg tab, 5 mg tab sol, 7.5 mg tab, 10 mg tab .....	43	femynor .....	106	FETZIMA .....	33
EVOMELA .....	43	fenofibrate 48 mg tab, 54 mg tab, 67 mg cap, 134 mg cap, 145 mg tab, 160 mg tab, 200 mg cap .....	72	FETZIMA TITRATION .....	33
EVOTAZ .....	59	fenofibrate micronized 43 mg cap, 67 mg cap, 130 mg cap, 134 mg cap, 200 mg cap .....	72	finasteride .....	102
exemestane .....	43	fenofibric acid .....	72	FINTEPLA .....	29
EXKIVITY .....	43	fenoprofen calcium 600 mg tab .....	17	FIRMAGON .....	111
EXTAVIA .....	77	fentanyl 12 mcg/hr patch 72hr, 25 mcg/hr patch 72hr, 50 mcg/hr patch 72hr, 75 mcg/hr patch 72hr, 100 mcg/hr patch 72hr .....	17	FIRMAGON (240 MG DOSE) .....	111
ezetimibe .....	71	fentanyl citrate 200 mcg loz handle, 400 mcg loz handle, 600 mcg loz handle, 800 mcg loz handle, 1200 mcg loz handle, 1600 mcg loz handle .....	17	flac .....	124
<b>F</b>		ferate 240 (27 fe) mg tab .....	86	flecainide acetate .....	72
FABRAZYME .....	101	ferosul 325 (65 fe) mg tab .....	86	FLONASE ALLERGY RELIEF 50 MCG/ACT SUSPENSION .....	126
falmina .....	106	FERRETTS 325 (106 FE) MG TAB .....	86	FLOVENT DISKUS 250 MCG/ACT AER POW BA .....	126
famciclovir 125 mg tab, 250 mg tab .....	59	ferrex 150 150 mg cap .....	86	FLOVENT DISKUS 50 MCG/ACT AER POW BA, 100 MCG/ACT AER POW BA .....	126
famciclovir 500 mg tab .....	59	ferric x-150 150 mg cap .....	86	FLOVENT HFA 110 MCG/ACT AEROSOL .....	126
famotidine 20 mg tab ....	94	FERROUS GLUCONATE 324 (37.5 FE) MG TAB, 324 (38 FE) MG TAB .....	86	FLOVENT HFA 220 MCG/ACT AEROSOL .....	126
famotidine 20 mg tab, 40 mg tab, 40 mg/4ml solution, 200 mg/20ml solution .....	94	ferrous sulfate 325 (65 fe) mg tab .....	86	FLOVENT HFA 44 MCG/ACT AEROSOL .....	126
famotidine maximum strength 20 mg tab .....	94	fluconazole 10 mg/ml recon susp, 40 mg/ml recon susp, 50 mg tab, 100 mg tab, 150 mg tab, 200 mg tab .....	100	fluconazole in sodium chloride 200-0.9 mg/100ml-% solution, 400-0.9 mg/200ml-% solution .....	37
famotidine premixed ....	94	flucytosine .....	37		
famotidine (pf) .....	94				
FANAPT 1 MG TAB .....	54				
FANAPT 10 MG TAB, 12 MG TAB .....	54				
FANAPT 2 MG TAB .....	54				
FANAPT 4 MG TAB .....	54				
FANAPT 6 MG TAB .....	54				
FANAPT 8 MG TAB .....	55				
FANAPT TITRATION PACK .....	55				
FANTASY LUBRICATED MISC .....	119				
FANTASY LUBRICATED/SPERMICIDE MISC .....	119				
FARXIGA .....	63				
febuxostat .....	39				

fludarabine phosphate 50 mg recon soln, 50 mg/2ml solution .....	43	5 mg tab, 5 mg/ml conc, 10 mg tab .....	55	FOTIVDA .....	44
fludrocortisone acetate .....	103	flurbiprofen .....	17	FREAMINE III .....	86
flunisolide .....	126	flurbiprofen sodium .....	122	FULPHILA .....	68
fluocinolone acetonide 0.01 % cream, 0.01 % solution, 0.025 % cream, 0.025 % ointment .....	80	flutamide .....	44	fulvestrant .....	44
fluocinolone acetonide 0.01 % oil .....	124	fluticasone propionate 0.005 % ointment, 0.05 % cream, 0.05 % lotion .....	80	furosemide 10 mg/ml solution inj .....	72
fluocinolone acetonide body .....	80	fluticasone propionate 50 mcg/act suspension .....	126	furosemide 10 mg/ml solution oral .....	72
fluocinolone acetonide scalp .....	80	fluticasone propionate 50 mcg/act suspension .....	126	furosemide 20 mg tab, 40 mg tab, 80 mg tab .....	72
fluocinonide 0.05 % cream, 0.05 % gel, 0.05 % ointment, 0.05 % solution .....	80	fluticasone-salmeterol 100-50 mcg/act aer pow ba, 250-50 mcg/act aer pow ba, 500-50 mcg/act aer pow ba .....	127	furosemide 8 mg/ml solution .....	72
fluocinonide emulsified base .....	80	fluvoxamine maleate 100 mg tab .....	34	FUZEON .....	59
fluorometholone .....	122	fluvoxamine maleate 25 mg tab, 50 mg tab .....	34	FYCOMPA 0.5 MG/ML SUSPENSION .....	29
fluorouracil 1 gm/20ml solution, 2.5 gm/50ml solution, 5 gm/100ml solution, 500 mg/10ml solution .....	43	folic acid 0.8 mg cap, 20 mg cap, 400 mcg tab, 800 mcg tab .....	86	FYCOMPA 2 MG TAB, 4 MG TAB, 6 MG TAB, 8 MG TAB, 10 MG TAB, 12 MG TAB .....	29
fluorouracil 2 % solution, 5 % cream, 5 % solution .....	80	folic acid 1 mg tab, 5 mg/ml solution .....	86	G	
fluoxetine hcl 10 mg cap .....	33	FOLOTYN .....	44	gabapentin 100 mg cap .....	29
fluoxetine hcl 20 mg cap .....	33	fondaparinux sodium 10 mg/0.8ml solution .....	68	gabapentin 250 mg/5ml solution, 300 mg/6ml solution .....	29
fluoxetine hcl 20 mg/5ml solution .....	33	fondaparinux sodium 2.5 mg/0.5ml solution .....	68	gabapentin 300 mg cap .....	30
fluoxetine hcl 40 mg cap .....	33	fondaparinux sodium 5 mg/0.4ml solution .....	68	gabapentin 400 mg cap .....	30
fluphenazine decanoate .....	55	fondaparinux sodium 7.5 mg/0.6ml solution .....	68	gabapentin 600 mg tab .....	30
fluphenazine hcl 1 mg tab, 2.5 mg tab, 2.5 mg/5ml elixir, 2.5 mg/ml solution, .....		FORTEO .....	118	gabapentin 800 mg tab .....	30
		fosamprenavir calcium .....	59	GAMUNEX-C .....	113
		fosfomycin tromethamine .....	26	ganciclovir sodium 500 mg recon soln .....	59
		fosinopril sodium .....	72	GARDASIL 9 .....	113
		fosinopril sodium-hctz .....	72	gas relief 20 mg/0.3ml suspension, 80 mg chew tab .....	94
		fosphenytoin sodium .....	29	gas relief drops infants 20 mg/0.3ml suspension .....	94

gas relief extra strength	59
125 mg cap, 125 mg chew tab	94
gas relief infants 20 mg/0.3ml suspension	94
gas relief ultra strength 180 mg cap	94
gas-x ultra strength 180 mg cap	95
GATTEX	95
GAUZE STERILE PADS 2	119
gavilax 17 gm/scoop powder	95
gavilyte-c	95
gavilyte-g	95
gavilyte-n with flavor pack	95
GAVRETO	44
GAZYVA	44
gemcitabine hcl 1 gm recon soln, 1 gm/26.3ml solution, 2 gm recon soln, 2 gm/52.6ml solution, 200 mg recon soln, 200 mg/5.26ml solution	44
GEMCITABINE HCL 1 GM/10ML SOLUTION, 2 GM/20ML SOLUTION, 200 MG/2ML SOLUTION	44
gemfibrozil	72
generlac	95
genograf 25 mg cap, 100 mg cap, 100 mg/ml solution	113
gentak	122
gentamicin sulfate 0.1 % cream, 0.1 % ointment	26
gentamicin sulfate 0.3 % solution	122
gentamicin sulfate 10 mg/ml solution, 40 mg/ml solution	26
GENVOYA	59
GILENYA	77
GILOTrif	44
glimepiride 1 mg tab	63
glimepiride 2 mg tab	63
glimepiride 4 mg tab	63
glipizide 10 mg tab	63
glipizide 5 mg tab	63
glipizide er 10 mg tab er 24h	64
glipizide er 2.5 mg tab er 24h	64
glipizide er 5 mg tab er 24h	64
glipizide xl 10 mg tab er 24h	64
glipizide xl 2.5 mg tab er 24h	64
glipizide xl 5 mg tab er 24h	64
glipizide-metformin hcl 2.5-250 mg tab	64
glipizide-metformin hcl 2.5-500 mg tab, 5-500 mg tab	64
GLUCAGEN HYPOKIT	64
GLUCAGON EMERGENCY 1 MG KIT	64
gluco burst 40 % gel	64
GLUCOSE 4 GM CHEW TAB, 4-6 GM-MG CHEW TAB	64
GLUCOSE INSTANT ENERGY 4-6 GM-MG CHEW TAB, 6-4 MG-GM CHEW TAB	64
glyburide 1.25 mg tab	64
glyburide 2.5 mg tab	64
glyburide 5 mg tab	64
GLYCERIN (ADULT) 2 GM SUPPOS	95
glycolax 17 gm/scoop powder	95
glycopyrrolate 0.2 mg/ml solution, 1 mg tab, 2 mg tab	95
glydo	21
GLYXAMBI	64
gnp acetaminophen	325
mg tab	17
gnp acid reducer 10 mg tab	95
gnp acid reducer max st 20 mg tab	95
gnp adult aspirin low strength 81 mg chew tab	17
gnp all day allergy 10 mg tab	127
gnp allergy 25 mg tab	127
gnp allergy relief 25 mg cap	127
gnp antacid & anti-gas 200-200-20 mg/5ml suspension, 400-400-40 mg/5ml suspension, 1000-60 mg chew tab	95
gnp antacid 500 mg chew tab	95
gnp antacid extra strength 160-105 mg chew tab, 750 mg chew tab	95
gnp antacid regular strength 200-200-20 mg/5ml suspension	95
gnp antacid ultra strength 1000 mg chew tab	95
gnp anti-gas 180 mg cap	95
gnp arthritis pain 1 % gel	17
gnp artificial tears 5-6 mg/ml solution	122
gnp aspirin 325 mg tab, 325 mg tab dr	17
gnp athletes foot 1 % cream	37
gnp bisa-lax 5 mg tab dr	95



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GNP CALAMINE 8-8 % LOTION .....	80	gnp loratadine 10 mg tab .....	127	gnp stool softener 100 mg cap, 250 mg cap .....	96
gnp calcium 1500 (600 ca) mg tab .....	86	gnp lubricating plus eye drops 0.5 % solution ...	122	gnp tab tussin 400 mg tab .....	127
gnp calcium 500 +d3 500-15 mg-mcg tab .....	86	gnp magnesium citrate 1.745 gm/30ml solution .....	96	gnp terbinafine hydrochloride 1 % cream .....	37
gnp calcium 600 +d3 600-20 mg-mcg tab .....	86	gnp miconazole 3 200 & 2 mg-% (9gm) kit .....	37	gnp tolnaftate 1 % cream .....	37
gnp calcium citrate +d3 315-250 mg-unit tab ....	86	gnp miconazole 7 2 % cream .....	37	gnp vitamin c 250 mg tab, 500 mg tab, 1000 mg tab .....	87
gnp childrens allergy 12.5 mg/5ml liquid .....	127	gnp milk of magnesia 1200 mg/15ml suspension ...	96	gnp vitamin c w/rose hips 500-37 mg tab .....	87
gnp clearlax 17 gm/scoop powder .....	95	gnp motion sickness relief 25 mg tab .....	35	gnp vitamin c/rose hips 1000 mg tab .....	87
gnp clotrimazole 3 2 % cream .....	37	gnp mucus er 600 mg tab er 12h .....	127	gnp vitamin d-400 10 mcg (400 unit) tab .....	118
gnp folic acid 400 mcg tab .....	87	gnp mucus relief 400 mg tab .....	127	goodsense all day allergy 10 mg tab .....	127
gnp gas relief 80 mg chew tab .....	95	gnp naproxen sodium 220 mg cap, 220 mg tab .....	17	goodsense antacid 750 mg chew tab .....	96
gnp gas relief extra strength 125 mg cap, 125 mg chew tab .....	95	gnp nasal decongestant 30 mg tab .....	127	goodsense arthritis pain 1 % gel .....	17
GNP GLUCOSE 4 GM CHEW TAB, 4-6 GM-MG CHEW TAB .....	64	gnp niacin flush free 400-100 mg cap .....	72	goodsense arthritis pain 650 mg tab er .....	77
gnp hydrocortisone 0.5 % cream .....	80	gnp nicotine mini 2 mg lozenge .....	22	goodsense aspirin 81 mg chew tab, 325 mg tab ....	17
gnp hydrocortisone max st 1 % ointment .....	80	gnp nicotine polacrilex 2 mg gum, 2 mg lozenge, 4 mg gum, 4 mg lozenge .....	22	goodsense aspirin adult low st 81 mg chew tab .....	17
gnp hydrocortisone plus 1 % cream .....	80	gnp omeprazole 20 mg tab dr .....	96	goodsense clearlax 17 gm/scoop powder .....	96
gnp hydrocortisone/aloe 1 % cream .....	80	gnp pain relief 325 mg tab .....	17	GOODSENSE GLUCOSE 4-6 GM-MG CHEW TAB .....	64
gnp ibuprofen 200 mg cap, 200 mg tab .....	17	gnp pink bismuth 262 mg chew tab, 262 mg tab ....	96	goodsense ibuprofen 200 mg tab .....	17
gnp iron 200 (65 fe) mg tab .....	87	GNP PRENATAL 28-0.8 MG TAB .....	87	goodsense lubricating eye drop 0.5 % solution ....	122
gnp lansoprazole 15 mg cap dr .....	95	gnp stomach relief 262 mg/15ml suspension ...	96	goodsense naproxen sodium 220 mg tab .....	18
gnp lice treatment 0.33-4 % shampoo, 1 % liquid .....	80	gnp stomach relief max st 525 mg/15ml suspension .....	96	goodsense nicotine 4 mg gum, 4 mg lozenge .....	22

<i>goodsense pain relief</i>	325	
<i>mg tab</i>	18	
<i>griseofulvin microsize</i>	125	
<i>mg/5ml suspension</i>	37	
<i>griseofulvin ultramicrosize</i>	37	
<i>guaiatussin ac 100-10 mg/5ml syrup</i>	127	
<i>guaifenesin 200 mg tab, 400 mg tab</i>	127	
<i>guaifenesin ac 100-10 mg/5ml syrup</i>	127	
<i>guaifenesin er 600 mg tab er 12h, 1200 mg tab er 12h</i>	127	
<i>guaifenesin-codeine 100-10 mg/5ml solution</i>	127	
<i>guanfacine hcl er</i>	77	
<b>H</b>		
<i>hailey 1.5/30</i>	106	
<i>hailey fe 1.5/30</i>	106	
<i>hailey fe 1/20</i>	106	
<i>HALAVEN</i>	44	
<i>halobetasol propionate 0.05 % cream, 0.05 % ointment</i>	80	
<i>haloperidol</i>	55	
<i>haloperidol decanoate</i>	55	
<i>haloperidol lactate</i>	55	
<i>HARVONI</i>	59	
<i>HAVRIX</i>	113	
<i>heartburn relief 10 mg tab</i>	96	
<i>heartburn relief max st 20 mg tab</i>	96	
<i>heather</i>	106	
<i>HEMADY</i>	103	
<i>HEPARIN SOD (PORCINE) IN D5W</i>	68	
<i>heparin sodium (porcine) 1000 unit/ml solution, 5000 unit/ml solution,</i>		
<i>10000 unit/ml solution, 20000 unit/ml solution</i>	68	
<i>HEPARIN (PORCINE) IN NACL 12500-0.45 UT/250ML-% SOLUTION, 25000-0.45 UT/500ML-% SOLUTION</i>	68	
<i>HEPARIN (PORCINE) IN NACL 25000-0.45 UT/250ML-% SOLUTION .... 68 hepatamine</i>	87	
<i>HERCEPTIN</i>	44	
<i>HERCEPTIN HYLECTA</i>	44	
<i>HETLIOZ</i>	130	
<i>HIBERIX</i>	113	
<i>hm advanced antacid max st 400-400-40 mg/5ml suspension</i>	96	
<i>hm antacid 200-200-20 mg/5ml suspension</i>	96	
<i>hm antacid anti-gas ex st 400-400-40 mg/5ml suspension</i>	96	
<i>hm antacid extra strength 750 mg chew tab</i>	96	
<i>hm antacid regular strength 500 mg chew tab</i>	96	
<i>hm antacid/antigas 200-200-20 mg/5ml suspension</i>	96	
<i>hm aspirin 81 mg chew tab, 325 mg tab</i>	18	
<i>hm aspirin ec 325 mg tab dr</i>	18	
<i>hm aspirin ec low dose 81 mg tab dr</i>	18	
<i>HM CALAMINE 8-8 % LOTION</i>	80	
<i>hm calcium antacid ex st 750 mg chew tab</i>	96	
<i>hm chest congestion relief 400 mg tab</i>	127	
<i>hm clearlax 17 gm/scoop powder</i>	96	
<i>hm esomeprazole magnesium dr 20 mg cap dr</i>	96	
<i>hm famotidine 10 mg tab, 20 mg tab</i>	96	
<i>hm gas relief 80 mg chew tab</i>	96	
<i>hm gas relief infants drops 20 mg/0.3ml suspension</i>	96	
<i>hm hydrocortisone plus 1 % cream</i>	80	
<i>hm hydrocortisone-aloe max st 1 % cream</i>	80	
<i>hm ibuprofen 200 mg cap, 200 mg tab</i>	18	
<i>hm ibuprofen ib 200 mg tab</i>	18	
<i>hm laxative 5 mg tab dr</i>	96	
<i>hm lice killing max st 0.33-4 % shampoo</i>	81	
<i>hm lice treatment 1 % liquid</i>	81	
<i>hm lubricating plus 0.5 % solution</i>	122	
<i>hm milk of magnesia 1200 mg/15ml suspension</i>	97	
<i>hm mucus relief 600 mg tab er 12h</i>	127	
<i>hm mucus relief max st 1200 mg tab er 12h</i>	127	
<i>hm naproxen sodium 220 mg cap, 220 mg tab</i>	18	
<i>hm nicotine polacrilex 2 mg gum, 2 mg lozenge, 4 mg gum, 4 mg lozenge</i>	22	
<i>hm omeprazole 20 mg tab dr</i>	97	
<i>hm pain reliever 325 mg tab</i>	18	



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hm stomach relief 262 mg chew tab .....	97	HUMULIN 70/30 .....	65	hydrocortisone acetate 1 % ointment .....	103
hm stool softener 100 mg cap .....	97	KWIKPEN .....	65	hydrocortisone max st 1 % cream .....	81
HUMALOG .....	64	HUMULIN N .....	65	hydrocortisone max st/12 moist 1 % cream .....	81
HUMALOG JUNIOR KWIKPEN .....	64	HUMULIN N KWIKPEN ....	65	hydrocortisone valerate 0.2 % cream .....	81
HUMALOG KWIKPEN .....	64	HUMULIN R .....	65	hydrocortisone valerate 0.2 % ointment .....	103
HUMALOG MIX 50/50 ....	64	HUMULIN R U-500 .....	65	hydrocortisone (perianal) .....	81
HUMALOG MIX 50/50 KWIKPEN .....	64	KWIKPEN .....	65	hydrocortisone-acetic acid .....	124
HUMALOG MIX 75/25 ....	64	HUMULIN R U-500 (CONCENTRATED) .....	65	hydromet 5-1.5 mg/5ml solution .....	127
HUMALOG MIX 75/25 KWIKPEN .....	65	hydralazine hcl 10 mg tab, 20 mg/ml solution, 25 mg tab, 50 mg tab, 100 mg tab .....	72	hydromorphone hcl 2 mg tab, 4 mg tab, 8 mg tab .....	18
HUMIRA 10 MG/0.1ML PREF SY KT, 20 MG/0.2ML PREF SY KT .....	113	hydrochlorothiazide .....	72	hydroxychloroquine sulfate 200 mg tab .....	52
HUMIRA 40 MG/0.4ML PREF SY KT, 40 MG/0.8ML PREF SY KT .....	113	hydrocod polst-cpm polst er 10-8 mg/5ml susp .....	127	hydroxyprogesterone caproate 1.25 gm/5ml solution .....	106
HUMIRA PEDIATRIC CROHNS START 80 MG/ 0.8ML & 40MG/0.4ML PREF SY KT .....	113	hydrocodone bit-homatrop mbr 5-1.5 mg tab, 5-1.5 mg/5ml solution .....	127	hydroxyurea .....	44
HUMIRA PEDIATRIC CROHNS START 80 MG/ 0.8ML PREF SY KT .....	113	hydrocodone-acetaminophen 2.5-108 mg/5ml solution, 5-217 mg/10ml solution, 7.5-325 mg/15ml solution .....	18	hydroxyzine hcl 10 mg tab, 25 mg tab, 50 mg tab .....	127
HUMIRA PEN 40 MG/0.4ML PEN KIT, 40 MG/0.8ML PEN KIT .....	113	hydrocodone-acetaminophen 5-325 mg tab, 7.5-325 mg tab, 10-325 mg tab .....	18	hydroxyzine pamoate 25 mg cap, 50 mg cap .....	62
HUMIRA PEN 80 MG/0.8ML PEN KIT .....	114	hydrocodone-ibuprofen 5-200 mg tab, 7.5-200 mg tab .....	18	hyoscyamine sulfate 0.125 mg sl tab, 0.125 mg tab, 0.125 mg tab disp .....	97
HUMIRA PEN-CD/UC/HS STARTER 40 MG/0.8ML PEN KIT .....	114	hydrocortisone 0.5 % cream, 1 % cream, 1 % ointment .....	81	HYPERRAB .....	114
HUMIRA PEN-CD/UC/HS STARTER 80 MG/0.8ML PEN KIT .....	114	hydrocortisone 1 % cream, 1 % ointment, 2.5 % cream, 2.5 % lotion, 2.5 % ointment .....	81	HYPERRAB S/D .....	114
HUMIRA PEN-PEDIATRIC UC START .....	114	hydrocortisone 5 mg tab, 10 mg tab, 20 mg tab, 100 mg/60ml enema .....	117	I	
HUMIRA PEN-PS/UV/ADOL HS START .....	114	ibandronate sodium 150 mg tab .....	118	ibuprofen 200 mg tab .....	18
HUMIRA PEN-PSOR/UVEIT STARTER .....	114	IBRANCE .....	44	ibuprofen 200 mg tab .....	18



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<i>ibuprofen 100 mg/5ml suspension, 400 mg tab, 600 mg tab, 800 mg tab</i> .....	18	INFANRIX .....	114	INVEGA HAFYERA 1092 MG/ 3.5ML SUSP PRSYR .....	55
<i>ibuprofen 200 mg cap, 200 mg tab</i> .....	18	<i>infants gas relief 20 mg/ 0.3ml suspension</i> .....	97	INVEGA HAFYERA 1560 MG/ 5ML SUSP PRSYR .....	55
<i>icaps cap</i> .....	87	INFILXIMAB .....	114	INVEGA SUSTENNA 117 MG/0.75ML SUSP	
<i>icatibant acetate</i> .....	114	INGREZZA 40 & 80 MG CAP		PRSYR .....	55
<i>iclevia</i> .....	106	THPK .....	77	INVEGA SUSTENNA 156 MG/ML SUSP PRSYR .....	55
<b>ICLUSIG</b> .....	44	INGREZZA 40 MG CAP	77	INVEGA SUSTENNA 234 MG/1.5ML SUSP	
<i>idarubicin hcl</i> .....	44	INGREZZA 60 MG CAP, 80 MG CAP .....	77	PRSYR .....	55
<b>IDHIFA 100 MG TAB</b> .....	44	INLYTA 1 MG TAB .....	45	INVEGA SUSTENNA 39 MG/ 0.25ML SUSP PRSYR .....	55
<b>IDHIFA 50 MG TAB</b> .....	44	INLYTA 5 MG TAB .....	45	INVEGA SUSTENNA 78 MG/ 0.5ML SUSP PRSYR .....	55
<i>iferex 150 150 mg cap</i> .....	87	INQOVI .....	45	INVEGA TRINZA 273 MG/ 0.88ML SUSP PRSYR .....	55
<b>IFEX 3 GM RECON SOLN</b> .....	44	INREBIC .....	45	INVEGA TRINZA 410 MG/ 1.32ML SUSP PRSYR .....	55
<i>ifosfamide 1 gm recon soln, 1 gm/20ml solution, 3 gm recon soln, 3 gm/60ml solution</i> .....	44	INSULIN LISPRO .....	65	INVEGA TRINZA 546 MG/ 1.75ML SUSP PRSYR .....	55
<b>ILARIS</b> .....	114	INSULIN LISPRO JUNIOR KWIKPEN .....	65	INVEGA TRINZA 819 MG/ 2.63ML SUSP PRSYR .....	55
<b>ILEVRO</b> .....	122	INSULIN LISPRO PROT & LISPRO .....	65	INVIRASE 500 MG TAB .....	59
<i>imatinib mesylate</i> .....	44	INSULIN LISPRO (1 UNIT DIAL) .....	65	INVOKAMET .....	65
<b>IMBRUVICA 140 MG CAP, 140 MG TAB</b> .....	44	INSULIN PEN		INVOKAMET XR .....	65
<b>IMBRUVICA 70 MG CAP, 280 MG TAB, 420 MG TAB, 560 MG TAB</b> .....	44	NEEDLE .....	119	INVOKANA 100 MG TAB .....	65
<b>IMBRUVICA 70 MG/ML SUSPENSION</b> .....	44	INSULIN SYRINGE (DISP) U-100 0.3 ML .....	119	INVOKANA 300 MG TAB .....	65
<b>IMFINZI</b> .....	45	INSULIN SYRINGE (DISP) U-100 1 ML .....	119	IPOL .....	114
<i>imipenem-cilastatin</i> .....	26	INSULIN SYRINGE (DISP) U-100 1/2 ML .....	119	<i>ipratropium bromide 0.02 % solution</i> .....	127
<i>imipramine hcl</i> .....	34	INTELENCE 100 MG TAB .....	59	<i>ipratropium bromide 0.03 % solution, 0.06 % solution</i> .....	128
<i>imiquimod 5 % cream</i> .....	81	INTELENCE 200 MG TAB .....	59	<i>ipratropium-albuterol</i> .....	128
<b>IMLYGIC</b> .....	45	INTELENCE 25 MG TAB .....	59	<i>irbesartan</i> .....	72
<b>IMOGLAM RABIES-HT</b> .....	114	INTRALIPID .....	87	<i>irbesartan-hydrochlorothiazide</i> .....	72
<b>IMOVAX RABIES</b> .....	114	INTRON A 6000000 UNIT/ML SOLUTION, 10000000 UNIT RECON SOLN,		<b>IRESSA</b> .....	45
<i>incassia</i> .....	106	10000000 UNIT/ML SOLUTION, 18000000 UNIT RECON SOLN, 50000000 UNIT RECON SOLN .....	114	<i>irinotecan hcl</i> .....	45
<b>INCRELEX</b> .....	104	UNIT RECON SOLN .....	114		
<i>indapamide</i> .....	72	<i>introvale</i> .....	106		
<i>indomethacin</i> .....	18				
<i>indomethacin er</i> .....	18				



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iron 240 (27 fe) mg tab, 325	JENTADUETO .....	65
(65 fe) mg tab .....	JENTADUETO XR 2.5-1000	
ISENTRESS 100 MG CHEW	MG TAB ER 24H .....	65
TAB, 100 MG PACKET ....	JENTADUETO XR 5-1000 MG	
ISENTRESS 25 MG CHEW	TAB ER 24H .....	65
TAB .....	JEVTANA .....	45
ISENTRESS 400 MG	jolessa .....	106
TAB .....	juleber .....	106
ISENTRESS HD .....	JULUCA .....	59
isibloom .....	junel 1.5/30 .....	106
isoniazid 50 mg/5ml syrup,	junel 1/20 .....	106
100 mg tab, 300 mg	junel fe 1.5/30 .....	106
tab .....	junel fe 1/20 .....	106
ISOPTO ATROPINE .....	JUXTAPID 30 MG CAP ....	72
isosorbide dinitrate 5 mg	JUXTAPID 5 MG CAP, 10 MG	
tab, 10 mg tab, 20 mg tab,	CAP, 20 MG CAP .....	72
30 mg tab .....	<b>K</b>	
isosorbide	KADCYLA .....	45
mononitrate .....	KALETRA 100-25 MG	
isosorbide mononitrate	TAB .....	59
er .....	KALETRA 200-50 MG	
isotretinoin .....	TAB .....	59
ISTODAX (OVERFILL) ....	kalliga .....	106
itraconazole 100 mg	KALYDECO 150 MG	
cap .....	TAB .....	128
ivermectin 3 mg tab ....	kariva .....	107
IXEMPRA KIT .....	kcl in dextrose-nacl 10-5-	
IXIARO .....	0.45 meq/l-%-% solution,	
<b>J</b>	20-5-0.2 meq/l-%-%	
JAKAFI .....	solution, 20-5-0.45 meq/l-	
jantoven .....	%-% solution, 20-5-0.9	
JANUMET .....	meq/l-%-% solution, 30-5-	
JANUMET XR 100-1000 MG	0.45 meq/l-%-% solution,	
TAB ER 24H .....	40-5-0.45 meq/l-%-%	
JANUMET XR 50-1000 MG	solution, 40-5-0.9 meq/l-%-	
TAB ER 24H, 50-500 MG TAB	% solution .....	87
ER 24H .....	KCL-LACTATED RINGERS-	
JANUVIA 100 MG TAB ....	D5W .....	87
JANUVIA 25 MG TAB .....	KEDRAB .....	114
JANUVIA 50 MG TAB .....	kelnor 1/35 .....	107
JARDIANCE .....	kelnor 1/50 .....	107
javygtor 100 mg tab ....	KEPIVANCE .....	78
JEMPERLI .....	ketoconazole 2 % cream, 2	
jencycla .....	% shampoo .....	37
	<i>ketoconazole 200 mg</i>	
	<i>tab .....</i>	37
	<i>ketorolac tromethamine</i>	
	<i>0.4 % solution, 0.5 %</i>	
	<i>solution .....</i>	122
	<i>ketotifen fumarate 0.025 %</i>	
	<i>solution .....</i>	122
	<i>KEYTRUDA .....</i>	45
	<i>KHAPZORY .....</i>	45
	<i>KIMONO MICRO THIN PLUS</i>	
	<i>MISC .....</i>	120
	<i>KIMONO SENSATION</i>	
	<i>MISC .....</i>	120
	<i>KIMONO SENSATION PLUS</i>	
	<i>MISC .....</i>	120
	<i>KINRIX .....</i>	114
	<i>KISQALI FEMARA (400 MG</i>	
	<i>DOSE) .....</i>	45
	<i>KISQALI FEMARA (600 MG</i>	
	<i>DOSE) .....</i>	45
	<i>KISQALI FEMARA(200 MG</i>	
	<i>DOSE) .....</i>	45
	<i>KISQALI (200 MG</i>	
	<i>DOSE) .....</i>	45
	<i>KISQALI (400 MG</i>	
	<i>DOSE) .....</i>	45
	<i>KISQALI (600 MG</i>	
	<i>DOSE) .....</i>	45
	<i>klor-con 10 .....</i>	87
	<i>klor-con 8 meq tab er ....</i>	87
	<i>klor-con m10 .....</i>	87
	<i>klor-con m15 .....</i>	87
	<i>klor-con m20 .....</i>	87
	<i>KORLYM .....</i>	103
	<i>kp adults 50+ daily formula</i>	
	<i>tab .....</i>	87
	<i>kp calcium citrate+d 315-</i>	
	<i>250 mg-unit tab .....</i>	87
	<i>kp folic acid 1 mg tab, 800</i>	
	<i>mcg tab .....</i>	87
	<i>kp mag-oxide magnesium</i>	
	<i>200 mg tab .....</i>	87
	<i>kp mens 50+ daily formula</i>	
	<i>tab .....</i>	87



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<i>kp womens 50+ daily formula tab</i> .....	87	LANCETS ULTRA THIN MISC .....	120	LENVIMA (20 MG DAILY DOSE) .....	46
KROGER GLUCOSE 4-6 GM-MG CHEW TAB .....	66	LANOXIN 250 MCG TAB .....	72	LENVIMA (24 MG DAILY DOSE) .....	46
<i>kurvelo</i> .....	107	LANOXIN 62.5 MCG TAB .....	73	LENVIMA (4 MG DAILY DOSE) .....	46
KYPROLIS .....	45	LANREOTIDE ACETATE .....	111	LENVIMA (8 MG DAILY DOSE) .....	46
<b>L</b>		<i>lansoprazole 15 mg cap dr</i> .....	97	<i>lessina</i> .....	107
<i>labetalol hcl 5 mg/ml solution, 100 mg tab, 200 mg tab, 300 mg tab</i> .....	72	<i>lansoprazole 15 mg cap dr</i> .....	97	<i>letrozole</i> .....	46
<i>lacosamide 10 mg/ml solution</i> .....	30	<i>lansoprazole 30 mg cap dr</i> .....	97	<i>leucovorin calcium 100 mg/10ml solution</i> .....	46
<i>lacosamide 100 mg tab, 150 mg tab, 200 mg tab</i> .....	30	LANTUS .....	66	<i>leucovorin calcium 5 mg tab, 10 mg tab, 15 mg tab, 25 mg tab</i> .....	46
<i>lacosamide 200 mg/20ml solution</i> .....	30	LANTUS SOLOSTAR .....	66	<i>leucovorin calcium 50 mg recon soln, 100 mg recon soln, 200 mg recon soln, 350 mg recon soln, 500 mg recon soln</i> .....	46
<i>lacosamide 50 mg tab</i> .....	30	<i>lapatinib ditosylate</i> .....	45	LEUKERAN .....	46
<i>lactated ringers</i> .....	88	<i>larin 1.5/30</i> .....	107	<i>leuprolide acetate</i> .....	111
<i>lactated ringers solution (irrigation)</i> .....	88	<i>larin 1/20</i> .....	107	<i>levalbuterol hcl 0.31 mg/3ml nebu soln, 1.25 mg/0.5ml nebu soln, 1.25 mg/3ml nebu soln</i> .....	128
<i>lactulose 10 gm/15ml solution, 20 gm/30ml solution</i> .....	97	<i>larissia</i> .....	107	<i>levalbuterol hcl 0.63 mg/3ml nebu soln</i> .....	128
<i>lactulose encephalopathy</i> .....	97	<i>latanoprost</i> .....	122	<i>levalbuterol tartrate</i> ....	128
LAMISIL AT 1 % CREAM .....	37	LATUDA 20 MG TAB, 40 MG TAB, 60 MG TAB, 120 MG TAB .....	63	LEVEMIR .....	66
<i>lamivudine 10 mg/ml solution</i> .....	59	LEENA .....	107	LEVEMIR FLEXTOUCH .....	66
<i>lamivudine 100 mg tab</i> .....	59	<i>leflunomide</i> .....	114	<i>levetiracetam 100 mg/ml solution, 250 mg tab, 500 mg tab, 500 mg/5ml solution, 750 mg tab, 1000 mg tab</i> .....	30
<i>lamivudine 150 mg tab</i> .....	59	<i>lenalidomide 10 mg cap</i> .....	45	<i>levetiracetam er 500 mg tab er 24h</i> .....	30
<i>lamivudine 300 mg tab</i> .....	59	<i>lenalidomide 2.5 mg cap, 15 mg cap, 20 mg cap, 25 mg cap</i> .....	45	<i>levetiracetam er 750 mg tab er 24h</i> .....	30
<i>lamivudine-zidovudine</i> .....	59	<i>lenalidomide 5 mg cap</i> .....	46	<i>levetiracetam in nacl</i> ....	30
<i>lamotrigine 5 mg chew tab, 25 mg chew tab, 25 mg tab, 100 mg tab, 150 mg tab, 200 mg tab</i> .....	30	LENVIMA (10 MG DAILY DOSE) .....	46	<i>levo-t</i> .....	111
		LENVIMA (12 MG DAILY DOSE) .....	46	<i>levobunolol hcl</i> .....	122
		LENVIMA (14 MG DAILY DOSE) .....	46		
		LENVIMA (18 MG DAILY DOSE) .....	46		



<i>levocarnitine 1 gm/10ml solution, 330 mg tab</i> .... 88	<i>lice treatment 1 % lotion</i> ..... 81	<b>LONGS GLUCOSE 4-6 GM-MG CHEW TAB</b> ..... 66
<i>levocarnitine sf</i> ..... 88	<i>lidocaine 5 % ointment</i> ..... 21	<b>LONSURF</b> ..... 46
<i>levocetirizine dihydrochloride 5 mg tab</i> ..... 128	<i>lidocaine 5 % patch</i> ..... 21	<i>loperamide hcl 2 mg cap</i> ..... 97
<i>levofloxacin 25 mg/ml solution iv</i> ..... 26	<i>lidocaine hcl 4 % solution</i> ..... 21	<i>lopinavir-ritonavir 100-25 mg tab</i> ..... 60
<i>levofloxacin 250 mg tab, 500 mg tab, 750 mg tab</i> ..... 26	<i>lidocaine hcl urethral/mucosal</i> ..... 21	<i>lopinavir-ritonavir 200-50 mg tab</i> ..... 60
<i>levofloxacin in d5w</i> ..... 26	<i>lidocaine hcl (cardiac) pf 100 mg/5ml soln prsyr</i> ..... 21	<i>lopinavir-ritonavir 400-100 mg/5ml solution</i> ..... 60
<i>levoleucovorin calcium</i> ..... 46	<i>lidocaine hcl (pf) 2 % solution</i> ..... 21	<i>loratadine 10 mg tab</i> ..... 128
<i>levonest</i> ..... 107	<i>lidocaine viscous hcl</i> ..... 21	<i>lorazepam 0.5 mg tab, 1 mg tab</i> ..... 62
<i>levonorg-eth estrad triphasic</i> ..... 107	<i>lidocaine-prilocaine</i> ..... 21	<i>lorazepam 1 mg/0.5ml conc, 2 mg tab, 2 mg/ml conc</i> ..... 63
<i>levonorgest-eth estrad 91-day 0.15-0.03 mg tab</i> ..... 107	<i>lillow</i> ..... 107	<i>lorazepam intensol</i> ..... 63
<i>levonorgestrel-ethinyl estrad 0.1-20 tab, 0.15-30 tab</i> ..... 107	<i>lindane</i> ..... 81	<b>LORBRENA 100 MG TAB</b> ..... 46
<i>levora 0.15/30 (28)</i> ..... 107	<i>linezolid 100 mg/5ml recon susp</i> ..... 26	<b>LORBRENA 25 MG TAB</b> ..... 46
<i>levorphanol tartrate 2 mg tab</i> ..... 18	<i>linezolid 600 mg tab</i> ..... 26	<i>losartan potassium</i> ..... 73
<i>levothyroxine sodium 25 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab, 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 300 mcg tab</i> ..... 111	<i>linezolid 600 mg/300ml solution</i> ..... 26	<i>losartan potassium-hctz</i> ..... 73
<i>levoxyl</i> ..... 111	<i>linezolid in sodium chloride</i> ..... 26	<i>lovastatin</i> ..... 73
<b>LEXIVA 50 MG/ML SUSPENSION</b> ..... 59	<i>LINZESS</i> ..... 97	<i>low-ogestrel</i> ..... 107
<i>LIBTAYO</i> ..... 46	<i>liothyronine sodium 5 mcg tab, 25 mcg tab, 50 mcg tab</i> ..... 111	<i>loxapine succinate</i> ..... 55
<i>lice killing 0.33-4 % shampoo</i> ..... 81	<i>liquid calcium with d3 600-12.5 mg-mcg cap</i> ..... 88	<i>lubiprostone</i> ..... 97
<i>lice killing maximum strength 0.33-4 % shampoo</i> ..... 81	<i>liquid calcium/vitamin d 600-5 mg-mcg cap</i> ..... 88	<i>lubricating plus eye drops 0.5 % solution</i> ..... 122
	<i>lisinopril</i> ..... 73	<b>LUMAKRAS</b> ..... 46
	<i>lisinopril-hydrochlorothiazide</i> ..... 73	<b>LUMIGAN</b> ..... 123
	<i>LITHIUM</i> ..... 63	<b>LUMIZYME</b> ..... 101
	<i>lithium carbonate</i> ..... 63	<b>LUMOXITI</b> ..... 46
	<i>lithium carbonate er</i> ..... 63	<b>LUPRON DEPOT (1-MONTH) 3.75 MG KIT</b> ..... 111
	<i>loestrin 1.5/30 (21)</i> ..... 107	<b>LUPRON DEPOT (1-MONTH) 7.5 MG KIT</b> ..... 111
	<i>loestrin 1/20 (21)</i> ..... 107	<b>LUPRON DEPOT-PED (1-MONTH) 7.5 MG KIT</b> ..... 111
	<i>loestrin fe 1.5/30</i> ..... 107	<i>lulera</i> ..... 107
	<i>loestrin fe 1/20</i> ..... 107	<b>LYBALVI</b> ..... 34
	<i>LOKELMA</i> ..... 88	

lyeq .....	107	MAGOX 400 400 (240 MG)	meropenem .....	26
LYNPARZA .....	46	MG TAB .....	mesalamine 1.2 gm tab dr,	
LYSODREN .....	111	maraviroc .....	4 gm enema, 1000 mg	
LYUMJEV .....	66	marlissa .....	suppos .....	117
LYUMJEV KWIKPEN .....	66	MARPLAN .....	mesalamine er 0.375 gm	
lyza .....	107	MATULANE .....	cap er 24h .....	117
<b>M</b>		meclizine hcl .....	mesalamine er 500 mg cap	
M-CLEAR WC 100-6.3 MG/		er .....	er .....	117
5ML SOLUTION .....	128	meclofenamate	mesalamine-	
M-M-R II .....	114	sodium .....	cleanser .....	117
mafénide acetate .....	81	medroxyprogesterone	mesna .....	47
mag-al plus 200-200-20		acetate 2.5 mg tab, 5 mg	MESNEX 400 MG TAB ....	47
mg/5ml liquid .....	97	tab, 10 mg tab, 150 mg/ml	metformin hcl 1000 mg	
mag-al plus xs 400-400-40		susp prsyr, 150 mg/ml	tab .....	66
mg/5ml liquid .....	97	suspension .....	metformin hcl 500 mg	
magnesium citrate 1.745		108	tab .....	66
gm/30ml solution .....	97	mefloquine hcl .....	metformin hcl 850 mg	
MAGNESIUM CITRATE 100		megestrol acetate 20 mg	tab .....	66
MG TAB .....	88	tab, 40 mg tab .....	metformin hcl er 500 mg	
magnesium gluconate 27.5		megestrol acetate 40 mg/	tab er 24h .....	66
mg tab .....	88	ml suspension, 400 mg/	metformin hcl er 750 mg	
magnesium lactate 84 mg		10ml suspension, 800 mg/	tab er 24h .....	66
(7meq) tab er .....	88	20ml suspension .....	methadone hcl 10 mg/ml	
magnesium oxide -mg		108	conc .....	18
supplement 250 mg		meijer c 500 mg tab .....	methadone hcl 10 mg/ml	
tab .....	88	MEKINIST 0.5 MG TAB ....	solution .....	18
magnesium oxide 250 mg		46	methadone hcl 5 mg tab,	
tab, 400 (240 mg) mg tab,		MEKINIST 2 MG TAB .....	10 mg tab .....	19
400 mg tab, 500 mg		46	methadone hcl 5 mg/5ml	
tab .....	88	MEKTOVI .....	solution, 10 mg/5ml	
MAGNESIUM OXIDE 400		47	solution .....	19
240 MG PACKET .....	88	meloxicam 7.5 mg tab, 15	methadone hcl	
magnesium oxide 420 mg		mg tab .....	intensol .....	19
tab, 500 mg cap .....	88	memantine hcl .....	methazolamide .....	123
MAGNESIUM SULFATE , 2		10 mg	methenamine	
GM/50ML SOLUTION, 4		tab .....	hippurate .....	26
GM/100ML SOLUTION, 4		32	methimazole .....	112
GM/50ML SOLUTION, 20		memantine hcl er .....	methocarbamol 500 mg	
GM/500ML SOLUTION, 40		32	tab, 750 mg tab .....	130
GM/1000ML		MENACTRA .....	methotrexate .....	115
SOLUTION .....	88	114	methotrexate sodium 1 gm	
magnesium-oxide 400 (240		MENEST .....	recon soln, 50 mg/2ml	
mg) mg tab .....	88	108	solution, 250 mg/10ml	
		MENQUADFI .....	solution .....	115
		114		
		MENVEO .....		
		114		
		MEPHYTON 5 MG TAB ....		
		68		
		mercaptopurine .....		
		47		

<i>methotrexate sodium</i> 2.5 <i>mg tab</i> ..... 115	<i>micafungin sodium</i> , 100 <i>mg recon soln</i> ..... 37	<i>modafinil</i> 100 mg <i>tab</i> ..... 131
<i>methotrexate sodium</i> ( <i>pf</i> ) ..... 115	<i>miconazole</i> 3 200 mg <i>suppos</i> ..... 37	<i>modafinil</i> 200 mg <i>tab</i> ..... 131
<i>methoxsalen rapid</i> ..... 81	<i>miconazole</i> 3 combo-supp 200 & 2 mg-% (9gm) <i>kit</i> ..... 37	<i>molindone hcl</i> ..... 55
<i>methylphenidate hcl</i> 5 mg <i>tab, 10 mg tab, 20 mg</i> <i>tab</i> ..... 77	<i>miconazole</i> 7 2 % cream, 100 mg suppos ..... 37	<i>mometasone furoate</i> 0.1 % <i>cream, 0.1 %</i> <i>ointment</i> ..... 103
<i>methylprednisolone</i> .... 103	<i>miconazole nitrate</i> 2 % <i>cream</i> ..... 37	<i>mometasone furoate</i> 0.1 % <i>solution</i> ..... 81
<i>methylprednisolone</i> <i>acetate</i> ..... 103	<i>microgestin</i> 1.5/30 .... 108	<i>monodoxine nl</i> ..... 26
<i>methylprednisolone</i> <i>sodium succ</i> 40 mg <i>recon</i> <i>soln, 125 mg recon soln,</i> <i>1000 mg recon soln</i> .... 103	<i>microgestin</i> 1/20 ..... 108	<i>MONJUVI</i> ..... 47
<i>metoclopramide hcl</i> 5 mg <i>tab, 5 mg/5ml solution, 5</i> <i>mg/ml solution, 10 mg tab,</i> <i>10 mg/10ml solution</i> .... 35	<i>microgestin</i> 24 fe ..... 108	<i>mono-linyah</i> ..... 108
<i>metolazone</i> ..... 73	<i>microgestin fe</i> 1.5/ 30 ..... 108	<i>montelukast sodium</i> ... 128
<i>metoprolol succinate</i> <i>er</i> ..... 73	<i>microgestin fe</i> 1/20 .... 108	<i>morphine sulfate</i> 1 mg/ml <i>solution, 2 mg/ml solution,</i> <i>4 mg/ml solution, 8 mg/ml</i> <i>solution, 15 mg tab, 30 mg</i> <i>tab</i> ..... 19
<i>metoprolol tartrate</i> 5 mg/ 5ml solution, 25 mg tab, 37.5 mg tab, 50 mg tab, 75	<i>midodrine hcl</i> ..... 73	<i>morphine sulfate</i> 20 mg/ 5ml solution ..... 19
<i>mg tab, 100 mg tab</i> ..... 73	<i>miglustat</i> ..... 101	<i>morphine sulfate</i> 50 mg/ml <i>solution</i> ..... 19
<i>metoprolol-</i> <i>hydrochlorothiazide</i> ..... 73	<i>milli</i> ..... 108	<i>morphine sulfate er</i> 100 mg <i>tab er, 200 mg tab er</i> ..... 19
<i>metronidazole</i> 0.75 % <i>cream, 0.75 % lotion</i> , 250	<i>milk of magnesia</i> 7.75 % <i>suspension, 400 mg/5ml</i> <i>suspension, 1200 mg/15ml</i> <i>suspension, 2400 mg/30ml</i> <i>suspension</i> ..... 97	<i>morphine sulfate er</i> 15 mg <i>tab er, 30 mg tab er, 60 mg</i> <i>tab er</i> ..... 19
<i>mg tab, 375 mg cap, 500</i> <i>mg tab, 500 mg/100ml</i> <i>solution</i> ..... 26	<i>milk of magnesia</i> <i>concentrate 2400 mg/10ml</i> <i>suspension</i> ..... 97	<i>morphine sulfate iv soln pf</i> 10 mg/ml ..... 19
<i>metronidazole</i> 0.75 % gel <i>vaginal</i> ..... 26	<i>minocycline hcl</i> ..... 26	<i>morphine sulfate</i> ( <i>concentrate</i> ) ..... 19
<i>metronidazole</i> 0.75 % gel ( <i>topical</i> ) ..... 26	<i>minoxidil</i> ..... 73	<i>morphine sulfate (pf)</i> 0.5 mg/ml solution, 1 mg/ml solution, 4 mg/ml solution, 8 mg/ml solution, 10 mg/ ml solution ..... 19
<i>metyrosine</i> ..... 73	<i>mintox maximum strength</i> 400-400-40 mg/5ml <i>suspension</i> ..... 97	<i>MORPHINE SULFATE (PF)</i> 1 MG/ML SOLUTION ..... 19
<i>mexiletine hcl</i> ..... 73	<i>MIRALAX</i> 17 GM/SCOOP POWDER ..... 97	<i>MORPHINE SULFATE (PF)</i> 2 MG/ML SOLUTION IV ..... 19
<i>mi-acid</i> 200-200-20 mg/ 5ml suspension ..... 97	<i>mirtazapine</i> 15 mg tab <i>disp, 30 mg tab disp, 45 mg</i> <i>tab, 45 mg tab disp</i> ..... 34	<i>motion-time</i> 25 mg chew tab ..... 36
<i>mi-acid gas relief</i> 80 mg <i>chew tab</i> ..... 97	<i>mirtazapine</i> 7.5 mg tab, 15	<i>MOVANTIK</i> ..... 98
	<i>mg tab, 30 mg tab</i> ..... 34	
	<i>misoprostol</i> ..... 104	
	<i>mitomycin</i> ..... 47	
	<i>mitoxantrone hcl</i> ..... 47	

MOVIPREP .....	98	MYRBETRIQ 25 MG TAB ER 24H, 50 MG TAB ER 24H .....	102	NEEDLES, INSULIN DISP., SAFETY .....	120
<i>moxifloxacin hcl 0.5 %</i> <i>solution .....</i>	123	<b>N</b>		<i>nefazodone hcl 200 mg</i> <i>tab .....</i>	34
<i>moxifloxacin hcl 400 mg</i> <i>tab .....</i>	26	<i>nabumetone .....</i>	19	<i>nefazodone hcl 50 mg tab,</i> <i>100 mg tab, 150 mg tab,</i> <i>250 mg tab .....</i>	34
MOZOBIL .....	68	<i>nadolol .....</i>	73	<i>nelarabine .....</i>	47
<i>mucosa 400 mg tab ....</i>	128	<i>nafcillin sodium 1 gm</i> <i>recon soln for inj .....</i>	27	<i>neo-polycin .....</i>	123
<i>mucus relief 400 mg tab,</i> <i>600 mg tab er 12h ....</i>	128	<i>nafcillin sodium 2 gm</i> <i>recon soln, 10 gm recon</i> <i>soln .....</i>	27	<i>neo-polycin hc .....</i>	123
<i>mucus relief chest</i> <i>congestion 200 mg</i> <i>tab .....</i>	128	NAGLAZYME .....	101	<i>neomycin sulfate .....</i>	27
<i>mucus relief er 600 mg tab</i> <i>er 12h .....</i>	128	<i>nalbuphine hcl 10 mg/ml</i> <i>solution .....</i>	19	<i>neomycin-bacitracin zn-</i> <i>polymyx .....</i>	123
<i>mucus relief max st 1200</i> <i>mg tab er 12h .....</i>	128	<i>nalbuphine hcl 20 mg/ml</i> <i>solution .....</i>	19	<i>neomycin-polymyxin b</i> <i>gu .....</i>	27
MULTAQ .....	73	<i>naloxone hcl 0.4 mg/ml</i> <i>soln cart, 0.4 mg/ml</i> <i>solution, 2 mg/2ml soln</i> <i>prsy, 4 mg/10ml</i> <i>solution .....</i>	22	<i>neomycin-polymyxin-</i> <i>dexameth 0.1 %</i> <i>suspension, 3.5-10000-0.1</i>	
MULTIVITAMIN ADULT (MINERALS) TAB .....	88	<i>naloxone hcl 4 mg/0.1ml</i> <i>liquid .....</i>	22	<i>ointment, 3.5-10000-0.1</i> <i>suspension .....</i>	123
<i>multivitamin gummies</i> <i>adult chew tab .....</i>	88	<i>naltrexone hcl .....</i>	22	<i>neomycin-polymyxin-</i> <i>gramicidin .....</i>	123
<i>multivitamin gummies</i> <i>mens chew tab .....</i>	88	NAMZARIC .....	32	<i>neomycin-polymyxin-hc 1</i> <i>% solution, 3.5-10000-1</i> <i>solution .....</i>	124
<i>multivitamin gummies</i> <i>womens chew tab .....</i>	88	naproxen 250 mg tab, 375		<i>neomycin-polymyxin-hc</i> <i>3.5-10000-1</i> <i>suspension .....</i>	123
<i>mupirocin .....</i>	81	mg tab, 375 mg tab dr, 500		NERLYNX .....	47
<i>mupirocin calcium .....</i>	81	mg tab, 500 mg tab		NEULASTA .....	68
<i>mutamycin .....</i>	47	dr .....	19	NEULASTA ONPRO .....	68
<i>my choice 1.5 mg</i> <i>tab .....</i>	108	naproxen sodium .....	19	NEUPRO .....	53
<i>my way 1.5 mg tab .....</i>	108	naproxen sodium 220 mg		nevirapine 200 mg	
<i>mycophenolate mofetil 200</i> <i>mg/ml recon susp, 250 mg</i> <i>cap, 500 mg recon soln,</i> <i>500 mg tab .....</i>	115	cap, 220 mg tab .....	19	tab .....	60
<i>mycophenolate mofetil</i> <i>hcl .....</i>	115	NARCAN .....	22	nevirapine 50 mg/5ml	
<i>mycophenolate</i> <i>sodium .....</i>	115	nasal decongestant 30 mg		<i>suspension .....</i>	60
MYLOTARG .....	47	tab .....	128	nevirapine er 100 mg tab	
<i>myorisan .....</i>	81	NATACYN .....	123	er 24h .....	60
		<i>nateglinide 120 mg</i> <i>tab .....</i>	66	nevirapine er 400 mg tab	
		<i>nateglinide 60 mg tab ...</i>	66	er 24h .....	60
		NATPARA .....	118	NEXAVAR .....	47
		<i>natural vitamin d-3 125</i> <i>mcg (5000 ut) tab .....</i>	118	<i>niacin 50 mg tab, 100 mg</i> <i>tab, 250 mg tab, 500 mg</i> <i>tab .....</i>	73
		NAYZILAM .....	21		
		<i>necon 0.5/35 (28) .....</i>	108		

niacin er 250 mg cap er, 250 mg tab er, 500 mg cap er, 500 mg tab er .....	73	nitroglycerin 0.1 mg/hr patch 24hr, 0.2 mg/hr patch 24hr, 0.3 mg sl tab, 0.4 mg sl tab, 0.4 mg/hr patch 24hr, 0.6 mg sl tab, 0.6 mg/hr patch 24hr ....	74	NORVIR 80 MG/ML SOLUTION .....	60
niacin er (antihyperlipidemic) .....	73	NUXAFL 40 MG/ML SUSPENSION .....	37	NUBEQA .....	47
niacin flush free 400-100 mg cap .....	73	NUCALA 40 MG/0.4ML SOLN PRSYR, 100 MG RECON SOLN, 100 MG/ML		SOLN A-INJ, 100 MG/ML SOLN PRSYR .....	128
niacin (antihyperlipidemic) .....	73	NUEDEXTA .....	77	NULOJIX .....	115
niacinamide 500 mg tab, 500 mg tab er .....	73	NUPLAZID .....	55	NUTRILIPID .....	88
niacor .....	73	NYAMYC .....	37	nyamyc .....	37
nicardipine hcl 20 mg cap, 30 mg cap .....	73	NYLIA 1/35 .....	109	nylia 1/35 .....	109
NICORETTE 2 MG LOZENGE, 4 MG LOZENGE .....	22	NYLIA 7/7/7 .....	109	nylilia 7/7/7 .....	109
NICORETTE MINI 2 MG LOZENGE, 4 MG LOZENGE .....	22	Nystatin 100000 unit/gm cream, 100000 unit/gm ointment, 100000 unit/gm powder, 100000 unit/ml suspension, 500000 unit tab .....	38	nystatin 100000 unit/gm cream, 100000 unit/gm ointment, 100000 unit/gm powder, 100000 unit/ml suspension, 500000 unit tab .....	38
nicotine 7 mg/24hr patch 24hr, 14 mg/24hr patch 24hr, 21 mg/24hr patch 24hr, 21-14-7 mg/24hr kit .....	22	Nystatin-triamcinolone 100000-0.1 unit/gm-% cream .....	81	nystop .....	38
nicotine polacrilex 2 mg gum, 2 mg lozenge, 4 mg gum, 4 mg lozenge .....	22	O			
NICOTROL NS .....	22	ocella .....	109		
nifedipine er .....	73	OCTAGAM 1 GM/20ML SOLUTION, 2 GM/20ML			
nifedipine er osmotic release .....	74	SOLUTION, 2.5 GM/50ML SOLUTION, 5 GM/100ML			
nilutamide .....	47	SOLUTION, 25 GM/500ML SOLUTION, 30 GM/300ML			
nimodipine .....	74	SOLUTION .....	115		
NINLARO .....	47	octreotide acetate .....	111		
NIPENT .....	47	ODEFSEY .....	60		
nitazoxanide .....	52	ODOMZO .....	47		
nitisinone .....	101	OFEV .....	128		
NITRO-BID .....	74	ofloxacin 300 mg tab, 400 mg tab .....	27		
nitrofurantoin macrocrystal 50 mg cap, 100 mg cap .....	27	ofloxacin ophth soln 0.3% .....	123		
nitrofurantoin monohyd macro .....	27				



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<i>ofloxacin otic soln</i>	<i>one daily maximum</i>	<i>mg/20ml solution, 200</i>
0.3% ..... 124	<i>tab</i> ..... 89	<i>mg/40ml solution</i> ..... 47
<i>olanzapine 10 mg recon</i>	<i>one daily mens health</i>	<i>oxandrolone 10 mg</i>
<i>soln</i> ..... 55	<i>tab</i> ..... 89	<i>tab</i> ..... 109
<i>olanzapine 2.5 mg tab, 5</i>	<i>one daily womens 50+</i>	<i>oxandrolone 2.5 mg</i>
<i>mg tab, 5 mg tab disp, 7.5</i>	<i>tab</i> ..... 89	<i>tab</i> ..... 109
<i>mg tab, 10 mg tab, 10 mg</i>	<i>one-daily multi-vitamin</i>	<i>oxaprozin</i> ..... 19
<i>tab disp, 15 mg tab, 15 mg</i>	<i>tab</i> ..... 89	<i>oxcarbazepine 150 mg tab,</i>
<i>tab disp</i> ..... 55	<i>ONETOUCH DELICA</i>	<i>300 mg tab, 300 mg/5ml</i>
<i>olanzapine 20 mg tab, 20</i>	<i>LANCETS 30G MISC</i> ..... 120	<i>suspension, 600 mg</i>
<i>mg tab disp</i> ..... 55	<i>ONETOUCH DELICA</i>	<i>tab</i> ..... 30
<i>olanzapine-fluoxetine hcl</i>	<i>LANCETS 33G MISC</i> ..... 120	<i>oxybutynin chloride 5 mg</i>
<i>3-25 mg cap, 6-25 mg</i>	<i>ONETOUCH DELICA PLUS</i>	<i>tab</i> ..... 102
<i>cap</i> ..... 34	<i>LANCET30G MISC</i> ..... 120	<i>oxybutynin chloride 5 mg/</i>
<i>olanzapine-fluoxetine hcl</i>	<i>ONETOUCH DELICA PLUS</i>	<i>5ml syrup</i> ..... 102
<i>6-50 mg cap, 12-25 mg cap,</i>	<i>LANCET33G MISC</i> ..... 120	<i>oxybutynin chloride er 10</i>
<i>12-50 mg cap</i> ..... 34	<i>ONETOUCH ULTRA</i>	<i>mg tab er 24h, 15 mg tab</i>
<i>olmesartanamlodipine-</i>	<i>STRIP</i> ..... 120	<i>er 24h</i> ..... 102
<i>hctz</i> ..... 74	<i>ONETOUCH VERIO</i>	<i>oxybutynin chloride er 5</i>
<i>olopatadine hcl 0.1 %</i>	<i>STRIP</i> ..... 120	<i>mg tab er 24h</i> ..... 102
<i>solution, 0.2 %</i>	<i>ONUREG</i> ..... 47	<i>oxycodone hcl 5 mg cap, 5</i>
<i>solution</i> ..... 123	<i>opcicon one-step 1.5 mg</i>	<i>mg tab, 10 mg tab, 10 mg/</i>
<i>omega-3 1000 mg</i>	<i>tab</i> ..... 109	<i>0.5ml conc, 15 mg tab, 20</i>
<i>cap</i> ..... 88	<i>OPDIVO</i> ..... 47	<i>mg tab, 30 mg tab, 100</i>
<i>omega-3-acid ethyl</i>	<i>OPSUMIT</i> ..... 128	<i>mg/5ml conc</i> ..... 20
<i>esters</i> ..... 74	<i>oralone</i> ..... 78	<i>oxycodone-acetaminophen</i>
<i>omeprazole</i> ..... 98	<i>ORFADIN 4 MG/ML</i>	<i>2.5-325 mg tab, 5-325 mg</i>
<i>omeprazole 20 mg tab</i>	<i>SUSPENSION, 20 MG</i>	<i>tab, 7.5-325 mg tab, 10-325</i>
<i>dr</i> ..... 98	<i>CAP</i> ..... 101	<i>mg tab</i> ..... 20
<i>OMNITROPE 5 MG/1.5ML</i>	<i>ORGOVYX</i> ..... 111	<i>OXYTROL FOR WOMEN</i> 3.9
<i>SOLN CART, 5.8 MG RECON</i>	<i>ORKAMBI 100-125 MG TAB,</i>	<i>MG/24HR PATCH TW</i> ... 102
<i>SOLN, 10 MG/1.5ML SOLN</i>	<i>200-125 MG TAB</i> ..... 128	<i>oysco 500+d 500-200 mg-</i>
<i>CART</i> ..... 104	<i>orsythia</i> ..... 109	<i>unit tab</i> ..... 89
<i>ondansetron</i> ..... 36	<i>os-cal calcium + d3 500-5</i>	<i>oyster shell calcium + d</i>
<i>ondansetron hcl 24 mg</i>	<i>mg-mcg tab</i> ..... 89	<i>500-5 mg-mcg tab</i> ..... 89
<i>tab</i> ..... 36	<i>oseltamivir phosphate 6</i>	<i>oyster shell calcium + d3</i>
<i>ondansetron hcl 4 mg tab,</i>	<i>mg/ml recon susp, 30 mg</i>	<i>500-10 mg-mcg tab</i> ..... 89
<i>8 mg tab</i> ..... 36	<i>cap, 45 mg cap, 75 mg</i>	<i>oyster shell calcium 250+d</i>
<i>ondansetron hcl 4 mg/2ml</i>	<i>cap</i> ..... 60	<i>250-3.125 mg-mcg</i>
<i>soln prsyr, 4 mg/2ml</i>	<i>oxacillin sodium</i> ..... 27	<i>tab</i> ..... 89
<i>solution, 40 mg/20ml</i>	<i>oxaliplatin 50 mg recon</i>	<i>OYSTER SHELL CALCIUM</i>
<i>solution</i> ..... 36	<i>soln, 50 mg/10ml solution,</i>	<i>500 + D 500-3.125 MG-MCG</i>
<i>one daily adults 50+</i>	<i>100 mg recon soln, 100</i>	<i>TAB</i> ..... 89
<i>tab</i> ..... 89		

<i>oyster shell calcium</i> 500 mg tab .....	89	<i>paliperidone er</i> 6 mg tab er 24h .....	56	<i>pemetrexed disodium</i> 100 mg recon soln, 500 mg recon soln, 750 mg recon soln, 1000 mg recon soln .....	48
<i>oyster shell calcium</i> 500+d 500-10 mg-mcg chew tab .....	89	<i>pamidronate disodium</i> 30 mg/10ml solution, 90 mg/10ml solution .....	118	<i>penicillamine</i> 250 mg tab .....	102
<i>oyster shell calcium plus d</i> 500-5 mg-mcg tab .....	89	PAMIDRONATE DISODIUM 6 MG/ML SOLUTION .....	118	<b>PENICILLIN G POT IN DEXTROSE</b> .....	27
<i>oyster shell calcium w/d</i> 500-5 mg-mcg tab .....	89	PANRETIN .....	48	<i>penicillin g potassium</i> .....	27
OYSTER SHELL CALCIUM/D 500-5 MG-MCG TAB .....	89	pantoprazole sodium 20 mg tab dr, 40 mg tab dr .....	98	PENICILLIN G PROCAINE .....	27
<i>oyster shell calcium/d3</i> 500-5 mg-mcg tab .....	89	pantoprazole sodium 40 mg recon soln .....	98	<i>penicillin g sodium</i> .....	27
<i>oyster shell calcium/</i> vitamin d 250-3.125 tab, 500-5 tab .....	89	paraplatin .....	48	<i>penicillin v potassium</i> 125 mg/5ml recon soln, 250 mg tab, 250 mg/5ml recon soln, 500 mg tab .....	27
OYSTER SHELL CALCIUM/ VITAMIN D 500-5 MG-MCG PACKET .....	89	paricalcitol 1 mcg cap, 2 mcg cap, 4 mcg cap ....	118	<b>PENTACEL</b> .....	115
OZEMPIC (0.25 OR 0.5 MG/ DOSE) .....	66	paramomycin sulfate ....	27	<i>pentamidine isethionate</i> .....	52
OZEMPIC (1 MG/ DOSE) .....	66	paroxetine hcl 10 mg tab, 20 mg tab .....	34	<i>pentamidine isethionate</i> 300 mg recon soln for nebulization .....	52
OZEMPIC (2 MG/ DOSE) .....	66	paroxetine hcl 10 mg/5ml suspension .....	34	<b>PENTASA</b> .....	117
<b>P</b>		paroxetine hcl 30 mg tab .....	34	<i>pentoxifylline er</i> .....	74
<i>pacerone</i> .....	74	paroxetine hcl 40 mg tab .....	34	<i>peptic relief</i> 262 mg chew tab .....	98
<i>paclitaxel</i> 100 mg/16.7ml conc .....	47	PASER .....	39	<i>periogard</i> .....	78
<i>paclitaxel</i> 30 mg/5ml conc, 150 mg/25ml conc .....	47	PAXIL 10 MG/5ML SUSPENSION .....	34	<b>PERJETA</b> .....	48
<i>paclitaxel</i> 300 mg/50ml conc .....	47	PEAK AIR PEAK FLOW METER DEVICE .....	120	<i>permethrin</i> .....	81
<i>paclitaxel protein-bound part</i> .....	47	PEDIARIX .....	115	<i>perphenazine</i> .....	36
PADCEV .....	47	PEDVAX HIB .....	115	<b>PERSERIS</b> 120 MG	
<i>pain relief regular strength</i> 325 mg tab .....	20	peg 3350 17 gm packet, 17 gm/scoop powder .....	98	PRSYR .....	56
<i>pain reliever</i> 325 mg tab .....	20	peg 3350-kcl-na bicarb-nacl .....	98	<b>PERSERIS</b> 90 MG	
<i>paliperidone er</i> 1.5 mg tab er 24h, 3 mg tab er 24h, 9 mg tab er 24h .....	56	peg-3350/ electrolytes .....	98	PRSYR .....	56
		peg-3350/electrolytes/ ascorbat .....	98	<i>pfizerpen</i> .....	27
		peg-kcl-nacl-nasulf-na asc-c .....	98	<i>pharbedryl</i> 25 mg cap, 50 mg cap .....	128
		PEGASYS .....	115	<i>pharbetol</i> 325 mg tab ...	20
		PEMAZYRE .....	48	<b>PHAZYME MAXIMUM STRENGTH</b> 250 MG CAP .....	98
				<i>phenelzine sulfate</i> .....	34



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phenobarbital 100 mg tab .....	30	pimtrea .....	109	potassium chloride 10 meq cap er .....	89
phenobarbital 15 mg tab .....	30	pindolol .....	74	potassium chloride 10 meq tab er .....	90
phenobarbital 16.2 mg tab .....	30	pioglitazone hcl 15 mg tab .....	66	POTASSIUM CHLORIDE 2 MEQ/ML SOLUTION, 10	
phenobarbital 20 mg/5ml elixir .....	30	pioglitazone hcl 30 mg tab .....	66	MEQ/100ML SOLUTION, 10	
phenobarbital 30 mg tab .....	30	pioglitazone hcl 45 mg tab .....	66	MEQ/50ML SOLUTION, 20	
phenobarbital 32.4 mg tab .....	30	piperacillin sod-tazobactam soln .....	27	MEQ/100ML SOLUTION, 20	
phenobarbital 60 mg tab .....	30	PIQRAY (200 MG DAILY DOSE) .....	48	MEQ/50ML SOLUTION, 40	
phenobarbital 64.8 mg tab .....	30	PIQRAY (250 MG DAILY DOSE) .....	48	MEQ/100ML SOLUTION .....	90
phenobarbital 97.2 mg tab .....	30	PIQRAY (300 MG DAILY DOSE) .....	48	potassium chloride 20 meq cap er .....	90
phentermine hcl 15 mg cap, 30 mg cap, 37.5 mg cap, 37.5 mg tab .....	77	pirfenidone 267 mg tab .....	128	potassium chloride 8 meq cap er .....	90
PHENYTEK .....	30	pirfenidone 534 mg tab, 801 mg tab .....	128	potassium chloride 8 meq tab er .....	90
phenytoin 50 mg chew tab, 100 mg/4ml suspension, 125 mg/5ml suspension .....	31	pirmella 1/35 .....	109	potassium chloride crys 10 meq tab er .....	90
phenytoin infatabs .....	31	pirmella 7/7/7 .....	109	potassium chloride crys 20 meq tab er .....	90
phenytoin sodium .....	31	piroxicam .....	20	potassium chloride crys er 15 meq tab er .....	90
phenytoin sodium extended .....	31	plain niacin 250 mg tab, 500 mg tab .....	74	potassium chloride in dextrose .....	90
PHESGO .....	48	PLASMA-LYTE 148 .....	89	POTASSIUM CHLORIDE IN NACL 20-0.45 MEQ/L-% SOLUTION, 20-0.9 MEQ/L-% SOLUTION .....	90
philith .....	109	podofilox .....	81	potassium citrate 10 meq (1080 mg) tab er .....	90
phillips milk of magnesia 400 mg/5ml suspension .....	98	POLIVY .....	48	potassium citrate 15 meq (1620 mg) tab er .....	90
PHOSLYRA .....	89	poly-iron 150 150 mg cap .....	89	potassium citrate 5 meq (540 mg) tab er .....	90
PIFELTRO .....	60	polycin .....	123	POTELIGEO .....	48
pilocarpine hcl 1 % solution, 2 % solution, 4 % solution .....	123	POMALYST .....	48	PRADAXA .....	69
pilocarpine hcl 5 mg tab, 7.5 mg tab .....	78	portia-28 .....	109	PRALUENT .....	74
pimecrolimus .....	81	PORTRAZZA .....	48	pramipexole dihydrochloride .....	53
pimozide .....	56	posaconazole .....	38	prasugrel hcl .....	69
		potassium chloride 10 % solution, 20 meq/15ml (10%) solution, 40 meq/15ml (20%) solution .....	89	pravastatin sodium .....	74
				praziquantel .....	53

<i>prazosin hcl</i> .....	74	<i>prenatal vit w/ iron</i>	82
<i>prednisolone</i> .....	103	<i>carbonyl-folic acid</i> .....	90
<i>prednisolone acetate</i> .....	123	<b>PRENATAL VITAMIN AND MINERAL 28-0.8 MG TAB</b> .....	90
<b>PREDNISOLONE SODIUM PHOSPHATE 1 % SOLUTION</b> .....	123	<i>prenatal vitamin with minerals and folic acid greater than 0.8 mg oral tablet</i> .....	90
<i>prednisolone sodium phosphate 6.7 (5 base) mg/ 5ml solution, 15 mg/5ml solution</i> .....	103	<b>PRENATAL VITAMINS 28-0.8 MG TAB</b> .....	90
<i>prednisone 1 mg tab, 2.5 mg tab, 5 mg (21) tab thpk, 5 mg (48) tab thpk, 5 mg tab, 5 mg/5ml solution, 10 mg (21) tab thpk, 10 mg (48) tab thpk, 10 mg tab, 20 mg tab, 50 mg tab</i> .....	103	<i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha</i> .....	90
<b>PREDNISONE INTENSOL</b> .....	103	<b>PRESEVISION AREDS CAP</b> .....	90
<i>pregabalin 20 mg/ml solution</i> .....	77	<i>prevelite 4 gm packet, 4 gm/dose powder</i> .....	74
<i>pregabalin 200 mg cap</i> .....	78	<b>PREVYMIS 240 MG TAB</b> , 480 MG TAB .....	60
<i>pregabalin 225 mg cap, 300 mg cap</i> .....	78	<b>PREZCOBIX</b> .....	60
<i>pregabalin 25 mg cap, 50 mg cap, 75 mg cap, 100 mg cap, 150 mg cap</i> .....	78	<b>PREZISTA 100 MG/ML SUSPENSION</b> .....	60
<b>PREMARIN 0.3 MG TAB, 0.45 MG TAB, 0.625 MG TAB, 0.9 MG TAB, 1.25 MG TAB</b> .....	109	<b>PREZISTA 150 MG TAB</b> .....	60
<b>PREMARIN 0.625 MG/GM CREAM</b> .....	109	<b>PREZISTA 600 MG TAB</b> , 800 MG TAB .....	60
<b>PREMASOL</b> .....	90	<b>PREZISTA 75 MG TAB</b> .....	60
<b>PREMIUM CONDOMS LUBRICATED MISC</b> .....	120	<b>PRIFTIN</b> .....	40
<b>PREMPRO</b> .....	109	<i>primaquine phosphate</i> .....	53
<b>PRENATAL 27-0.8 MG TAB</b> .....	90	<i>primidone</i> .....	31
<b>PRENATAL ONE DAILY 27-0.8 MG TAB</b> .....	90	<b>PRIORIX</b> .....	115
		<b>PROAIR HFA</b> .....	128
		<b>PROAIR RESPICLICK</b> .....	129
		<i>probenecid</i> .....	39
		<i>procainamide hcl</i> .....	74
		<i>prochlorperazine</i> .....	36
		<i>edisylate</i> .....	36
		<i>prochlorperazine maleate</i> .....	36
		<b>PROCRIPT</b> .....	69
		<i>procto-med hc</i> .....	81
		<i>procto-pak</i> .....	82

PROQUAD .....	115	qc aspirin 325 mg tab, 325 mg tab dr .....	20	qc stool softener 100 mg cap .....	99
protriptyline hcl .....	34	qc aspirin low dose 81 mg chew tab, 81 mg tab dr .....	20	qc tolnaftate 1 % cream .....	38
pseudoephedrine hcl 30 mg tab .....	129	QC CALAMINE LOTION ...	82	QINLOCK .....	48
PULMOZYME .....	129	qc enteric aspirin 325 mg tab dr .....	20	QUADRACEL .....	115
PURIXAN .....	48	qc gas relief extra strength 125 mg cap .....	99	quetiapine fumarate 100 mg tab .....	56
px acid reducer max st 20 mg tab .....	98	qc gas relief extra strength 125 mg cap .....	99	quetiapine fumarate 150 mg tab .....	56
px gas relief extra strength 125 mg cap .....	98	qc gentle laxative 10 mg suppos .....	99	quetiapine fumarate 200 mg tab .....	56
px gas relief infants 20 mg/ 0.3ml suspension .....	98	qc heartburn antacid 160-105 mg chew tab .....	99	quetiapine fumarate 25 mg tab .....	56
px gas relief ultra strength 180 mg cap .....	98	qc ibuprofen 200 mg tab .....	20	quetiapine fumarate 300 mg tab .....	56
px pain relief extra strength 500 mg tab .....	20	qc ibuprofen ib 200 mg tab .....	20	quetiapine fumarate 400 mg tab .....	56
px stomach relief 262 mg chew tab, 262 mg/15ml suspension .....	98	qc loratadine allergy relief 10 mg tab .....	129	quetiapine fumarate 50 mg tab .....	56
pyrazinamide .....	40	qc magnesium citrate 1.745 gm/30ml solution .....	99	quetiapine fumarate er 150 mg tab er 24h, 200 mg tab er 24h .....	56
pyridostigmine bromide 30 mg tab, 60 mg tab, 60 mg/ 5ml solution .....	39	qc medifin 400 400 mg tab .....	129	quetiapine fumarate er 50 mg tab er 24h, 300 mg tab er 24h, 400 mg tab er 24h .....	56
pyrimethamine .....	53	qc miconazole 7.2 % cream .....	38	quinapril hcl .....	74
<b>Q</b>		qc milk of magnesia 400 mg/5ml suspension .....	99	quinapril-	
qc 3 day 4 % cream .....	38	qc mineral oil heavy oil .....	120	hydrochlorothiazide .....	74
qc acid controller 10 mg tab .....	98	qc mucus relief 600 mg tab er 12h .....	129	quinidine sulfate .....	75
qc acid controller max st 20 mg tab .....	98	qc mucus relief er 1200 mg tab er 12h .....	129	quinine sulfate .....	53
qc all day allergy 10 mg tab .....	129	qc mucus relief max st 1200 mg tab er 12h .....	129	QUINTABS TAB .....	90
qc antacid 200-200-20 mg/ 5ml suspension, 500 mg chew tab .....	98	qc naproxen sodium 220 mg tab .....	20	QVAR REDIHALER 40 MCG/ ACT AERO BA .....	129
qc antacid extra strength 750 mg chew tab .....	98	qc pain relief 325 mg tab .....	20	QVAR REDIHALER 80 MCG/ ACT AERO BA .....	129
qc antacid/anti-gas 200- 200-20 mg/5ml suspension, 400-400-40 mg/5ml suspension .....	99	qc pink bismuth 262 mg chew tab .....	99	<b>R</b>	
qc anti-gas 180 mg cap .....	99			RABAVERT .....	115
				raloxifene hcl .....	109
				ramelteon .....	131
				ramipril .....	75
				ranolazine er .....	75
				rasagiline mesylate .....	53



RAVICTI .....	101	RHOPRESSA .....	123	roweepra .....	31
<i>react 1.5 mg tab</i> .....	109	RIABNI .....	48	ROZLYTREK 100 MG	
<i>reclipsen</i> .....	109	<i>ribavirin</i> .....	60	CAP .....	49
RECOMBIVAX HB .....	115	RID COMPLETE LICE		ROZLYTREK 200 MG	
RECTIV .....	75	ELIMINATION KIT .....	82	CAP .....	49
<i>reeses pinworm medicine</i>		RIDAURA .....	115	RUBRACA .....	49
<i>144 (50 base) mg/ml</i>		<i>rifabutin</i> .....	40	<i>rufinamide 200 mg</i>	
<i>suspension</i> .....	53	<i>rifampin</i> .....	40	<i>tab</i> .....	31
<i>relafen</i> .....	20	<i>riluzole</i> .....	78	<i>rufinamide 40 mg/ml</i>	
RELENZA DISKHALER ....	60	<i>rimantadine hcl</i> .....	60	<i>suspension</i> .....	31
RELION GLUCOSE 4-6 GM-MG CHEW TAB .....	66	<i>ringers</i> .....	91	<i>rufinamide 400 mg</i>	
RELISTOR 12 MG/0.6ML SOLUTION .....	99	<i>ringers irrigation</i> .....	91	<i>tab</i> .....	31
RELISTOR 8 MG/0.4ML SOLUTION .....	99	RINVOQ .....	115	RUKOBIA .....	60
REMICADE .....	115	RISACAL-D 105-81-120 MG-MG-UNIT TAB .....	91	RYBELSUS 3 MG TAB ....	66
<i>repaglinide 0.5 mg tab</i> .....	66	RISPERDAL CONSTA ....	56	RYBELSUS 7 MG TAB, 14 MG TAB .....	66
<i>repaglinide 1 mg tab</i> ....	66	<i>risperidone 0.25 mg tab, 0.25 mg tab disp</i> .....	56	RYBREVANT .....	49
<i>repaglinide 2 mg tab</i> ....	66	<i>risperidone 0.5 mg tab, 0.5 mg tab disp</i> .....	56	RYDAPT .....	49
REPATHA .....	75	<i>risperidone 1 mg tab, 1 mg tab disp, 1 mg/ml solution</i> .....	56	RYLAZE .....	49
REPATHA PUSHTRONEX SYSTEM .....	75	<i>risperidone 2 mg tab, 2 mg tab disp</i> .....	56	RYTARY .....	53
REPATHA SURECLICK ....	75	<i>risperidone 3 mg tab disp</i> .....	56	<b>S</b>	
RESTASIS .....	123	<i>risperidone 3 mg tab, 4 mg tab, 4 mg tab disp</i> .....	56	<i>sajazir</i> .....	116
RESTASIS MULTIDOSE .....	123	<i>ritonavir</i> .....	60	<i>saline nasal spray 0.65 % solution</i> .....	120
RETEVMO 40 MG CAP ....	48	RITUXAN .....	48	SANTYL .....	82
RETEVMO 80 MG CAP ....	48	RITUXAN HYCELA .....	48	<i>sapropterin dihydrochloride 100 mg tab</i> .....	101
RETROVIR 10 MG/ML SOLUTION .....	60	<i>rivastigmine</i> .....	32	SARCLISA .....	49
REVLIMID 10 MG CAP ....	48	<i>rivastigmine tartrate</i> .....	32	SAVELLA .....	78
REVLIMID 2.5 MG CAP, 15 MG CAP, 20 MG CAP, 25 MG CAP .....	48	<i>rizatriptan benzoate</i> .....	39	SAVELLA TITRATION	
REVLIMID 5 MG CAP ....	48	ROCKLATAN .....	123	PACK .....	78
REXULTI 0.25 MG TAB, 0.5 MG TAB, 1 MG TAB, 2 MG TAB .....	56	ROMIDEPSIN 10 MG RECON SOLUTION .....	48	<i>sb acid reducer 10 mg tab</i> .....	99
REXULTI 3 MG TAB, 4 MG TAB .....	56	<i>ropinirole hcl</i> .....	53	<i>sb allergy 10 mg tab</i> ....	129
REYATAZ 50 MG PACKET .....	60	<i>rosadan</i> .....	27	<i>sb antacid 500 mg chew tab</i> .....	99
		<i>rosuvastatin calcium</i> ....	75	<i>sb antacid extra strength 750 mg chew tab</i> .....	99
		ROTARIX .....	115	<i>sb coughtab 200 mg tab</i> .....	129
		ROTATEQ .....	116	<i>sb loratadine 10 mg tab</i> .....	129

<i>sb milk of magnesia</i> 400 mg/5ml suspension .....	99	<i>silver sulfadiazine</i> .....	82	<i>sm antacid advanced</i> 200-200-20 mg/5ml suspension .....	99
<i>scalpicin maximum strength</i> 1 % solution .....	103	<i>SIMBRINZA</i> .....	123	<i>sm antacid advanced max st</i> 400-400-40 mg/5ml suspension .....	99
<i>SCEMBLIX</i> 20 MG TAB ....	49	<i>simethicone</i> 80 mg chew tab, 125 mg cap, 125 mg chew tab, 180 mg cap ...	99	<i>sm antacid/antigas</i> 200-200-20 mg/5ml suspension .....	99
<i>SCEMBLIX</i> 40 MG TAB ....	49	<i>simethicone drops infants</i> 20 mg/0.3ml suspension .....	120	<i>sm antifungal clotrimazole 1 % cream</i> .....	38
<i>scopolamine</i> .....	36	<i>simethicone ultra strength</i> 180 mg cap .....	99	<i>sm antifungal miconazole 2 % cream</i> .....	38
<i>SECUADO</i> .....	56	<i>simliya</i> .....	109	<i>sm antifungal tolnaftate 1 % cream</i> .....	38
<i>selegiline hcl</i> .....	53	<i>SIMULECT</i> .....	116	<i>sm aspirin</i> 325 mg tab .....	20
<i>selenium sulfide 2.5 % lotion</i> .....	82	<i>simvastatin</i> .....	75	<i>sm aspirin adult low strength</i> 81 mg chew tab, 81 mg tab dr .....	20
<i>SELZENTRY</i> 20 MG/ML SOLUTION .....	61	<i>sirolimus</i> 0.5 mg tab, 1 mg tab, 1 mg/ml solution, 2 mg tab .....	116	<i>sm aspirin ec</i> 325 mg tab dr .....	20
<i>SELZENTRY</i> 25 MG TAB, 150 MG TAB, 300 MG TAB ....	61	<i>SIRTURO</i> .....	40	<i>sm aspirin low dose</i> 81 mg chew tab .....	20
<i>SELZENTRY</i> 75 MG TAB .....	61	<i>SKYRIZI</i> 150 MG/ML SOLN PRSYR .....	116	<i>sm athletes foot 1 % cream</i> .....	38
<i>SEMGLEE</i> .....	67	<i>SKYRIZI</i> 360 MG/2.4ML SOLN CART .....	82	<i>sm calcium antacid</i> 500 mg chew tab .....	99
<i>sentry senior tab</i> .....	91	<i>SKYRIZI</i> 600 MG/10ML SOLUTION .....	82	<i>sm calcium antacid ex st</i> 750 mg chew tab .....	100
<i>SEREVENT DISKUS</i> .....	129	<i>SKYRIZI</i> PEN .....	116	<i>sm chest congestion relief</i> 400 mg tab .....	129
<i>sertraline hcl</i> 100 mg tab .....	34	<i>SKYRIZI</i> (150 MG DOSE) .....	116	<i>sm childrens aspirin</i> 81 mg chew tab .....	20
<i>sertraline hcl</i> 20 mg/ml conc .....	34	<i>SLO-NIACIN</i> 250 MG TAB ER, 500 MG TAB ER, 750 MG TAB ER .....	75	<i>sm clearlax</i> 17 gm/scoop powder .....	100
<i>sertraline hcl</i> 25 mg tab .....	34	<i>slow iron</i> 160 (50 fe) mg tab er .....	91	<i>sm clotrimazole vaginal</i> 1 % cream .....	38
<i>sertraline hcl</i> 50 mg tab .....	34	<i>sm 3-day vaginal</i> 2 % cream .....	38	<i>sm complete</i> 50+ ultimate mens tab .....	91
<i>setlakin</i> .....	109	<i>sm acid reducer</i> 10 mg tab, 200 mg tab .....	99	<i>sm complete</i> 50+ ultimate women tab .....	91
<i>sevelamer carbonate</i> 0.8 gm packet, 800 mg tab .....	91	<i>sm acid reducer max st</i> 20 mg tab .....	99	<i>sm complete tab</i> .....	91
<i>sevelamer carbonate</i> 2.4 gm packet .....	91	<i>sm all day allergy</i> 10 mg tab .....	129		
<i>sharobel</i> .....	109	<i>sm allergy relief</i> 1.34 mg tab, 12.5 mg/5ml liquid .....	129		
<i>SHINGRIX</i> .....	116				
<i>SIGNIFOR</i> .....	111				
<i>silace</i> 60 mg/15ml syrup, 150 mg/15ml liquid ....	99				
<i>siladryl</i> allergy 12.5 mg/5ml liquid .....	129				
<i>sildenafil citrate</i> 20 mg tab .....	129				

<i>sm double antibiotic 500-10000 unit/gm ointment</i> .....	27	<i>sm miconazole 3 200 &amp; 2 mg-% (9gm) kit</i> .....	38	<i>meq/ml solution, 5 % solution</i> .....	91
<i>sm esomeprazole magnesium 20 mg cap dr</i> .....	100	<i>sm miconazole 7 2 % cream, 100 mg suppos</i> .....	38	<i>sodium chloride 0.9 % solution irrigation</i> .....	91
<i>sm eye itch relief 0.025 % solution</i> .....	123	<i>sm milk of magnesia 1200 mg/15ml suspension</i> .....	100	<i>sodium chloride 0.9 % solution iv</i> .....	91
<i>sm gas relief 80 mg chew tab, 125 mg chew tab</i> .....	100	<i>sm mineral oil enema</i> .....	100	<i>sodium chloride irrigation soln 0.9%</i> .....	91
<i>sm gas relief antiflatuent 180 mg cap</i> .....	100	<i>sm mucus relief 600 mg tab er 12h</i> .....	129	<i>sodium chloride (hypertonic) 5 % ointment, 5 % solution</i> .....	124
<i>sm gas relief extra strength 125 mg cap</i> .....	100	<i>sm mucus relief max strength 1200 mg tab er 12h</i> .....	129	<i>sodium fluoride 2.2 mg</i> .....	91
<i>sm gas relief infants 20 mg/0.3ml suspension</i> .....	100	<i>sm naproxen sodium 220 mg cap, 220 mg tab</i> .....	20	<i>sodium phenylbutyrate 500 mg tab</i> .....	101
<i>SM GLUCOSE 4-6 GM-MG CHEW TAB</i> .....	67	<i>sm nicotine 2 mg lozenge, 4 mg gum, 14 mg/24hr patch 24hr, 21 mg/24hr patch 24hr</i> .....	22	<i>sodium polystyrene sulfonate</i> .....	91
<i>sm hydrocortisone max st 1 % ointment</i> .....	82	<i>sm nicotine polacrilex 2 mg gum, 4 mg gum, 4 mg lozenge</i> .....	22	<i>SOFOSBUVIR-VELPATASVIR</i> .....	61
<i>sm ibuprofen 200 mg cap, 200 mg tab</i> .....	20	<i>sm omeprazole 20 mg tab dr</i> .....	100	<i>solifenacin succinate</i> .....	102
<i>sm ibuprofen ib 200 mg tab</i> .....	20	<i>sm pain reliever 325 mg tab</i> .....	20	<i>SOLTAMOX</i> .....	49
<i>sm iron 325 (65 fe) mg tab</i> .....	91	<i>sm stomach relief 262 mg chew tab, 262 mg tab</i> .....	100	<i>SOMATULINE DEPOT</i> ....	111
<i>sm iron slow release 160 (50 fe) mg tab er</i> .....	91	<i>sm stool softener 100 mg cap</i> .....	100	<i>SOMAVERT</i> .....	112
<i>sm lice killing max strength 0.33-4 % shampoo</i> .....	82	<i>sm triple antibiotic 3.5-400-5000 ointment</i> .....	27	<i>sorafenib tosylate</i> .....	49
<i>sm lice treatment 1 % lotion</i> .....	82	<i>SMART SENSE GLUCOSE 4-6 GM-MG CHEW TAB</i> .....	67	<i>sorine</i> .....	75
<i>sm loratadine 10 mg tab</i> .....	129	<i>SOAANZ 20 MG TAB</i> .....	75	<i>sotalol hcl</i> .....	75
<i>sm lubricant eye drops 0.4-0.3 % solution</i> .....	123	<i>SOAANZ 40 MG TAB, 60 MG TAB</i> .....	75	<i>sotalol hcl (af)</i> .....	75
<i>sm lubricating tears 0.4-0.3 % solution</i> .....	124	<i>sodium chloride 0.45 % solution, 2.5 meq/ml solution, 3 % solution, 4</i> .....	4	<i>SPIRIVA</i> .....	
<i>sm magnesium citrate 1.745 gm/30ml solution</i> .....	100			<i>HANDIHALER</i> .....	130
				<i>SPIRIVA RESPIMAT</i> ....	130
				<i>spironolactone</i> .....	75
				<i>spironolactone-hctz</i> .....	75
				<i>SPRAVATO (56 MG DOSE)</i> .....	34
				<i>SPRAVATO (84 MG DOSE)</i> .....	35
				<i>sprintec 28</i> .....	109
				<i>SPRITAM 250 MG TAB, 500 MG TAB, 1000 MG TAB</i> ...	31
				<i>SPRITAM 750 MG TAB</i> ...	31
				<i>SPRYCEL</i> .....	49
				<i>sps</i> .....	91
				<i>sronyx</i> .....	110

<i>ssd</i>	82	<i>5ml suspension, 400-80 mg tab, 400-80 mg/5ml solution, 800-160 mg tab</i>	27	<i>tacrolimus 0.5 mg cap, 1 mg cap, 5 mg cap</i>	116
<i>st joseph low dose 81 mg chew tab</i>	21	<b>TAFINLAR</b>	49	<b>TAGRISSO</b>	49
<b>STAMARIL</b>	116	<b>TALZENNA 0.25 MG CAP</b>	49	<b>TALZENNA 0.5 MG CAP, 0.75 MG CAP, 1 MG CAP</b>	49
<i>stavudine 15 mg cap, 20 mg cap</i>	61	<i>tamoxifen citrate</i>	49	<i>tamsulosin hcl</i>	102
<i>stavudine 30 mg cap, 40 mg cap</i>	61	<b>TARGRETIN 1 % GEL</b>	49	<b>tarina fe 1/20</b>	110
<b>STELARA 130 MG/26ML SOLUTION</b>	82	<b>tarina fe 1/20 eq</b>	110	<b>TASIGNA</b>	49
<b>STELARA 45 MG/0.5ML SOLN PRSYR, 90 MG/ML SOLN PRSYR</b>	116	<i>tazarotene 0.05 % gel, 0.1 % gel</i>	82	<i>tazarotene 0.1 % cream</i>	82
<b>STELARA 45 MG/0.5ML SOLUTION</b>	116	<i>tazicef</i>	28	<b>TAZORAC 0.05 % CREAM, 0.05 % GEL, 0.1 % GEL</b>	82
<i>sterile water for irrigation</i>	120	<b>TAZVERIK</b>	49	<i>taztia xt</i>	75
<b>STIOLTO RESPIMAT</b>	130	<b>TDVAX</b>	116	<b>TECENTRIQ 1200 MG/20ML SOLUTION</b>	49
<b>STIVARGA</b>	49	<b>TECENTRIQ 840 MG/14ML SOLUTION</b>	50	<b>TECFIDERA 120 &amp; 240 MG MISC</b>	78
<i>stomach relief 262 mg chew tab, 525 mg/30ml suspension</i>	100	<b>TECFIDERA 120 MG CAP DR</b>	78	<b>TECFIDERA 240 MG CAP DR</b>	78
<i>stomach relief extra strength 525 mg/15ml suspension</i>	100	<b>TEFLARO</b>	28	<i>telmisartan</i>	75
<i>stool softener 100 mg cap</i>	100	<i>telmisartan-amlodipine 80-5 mg tab</i>	75	<i>telmisartan-amlodipine 80-5 mg tab</i>	75
<i>streptomycin sulfate</i>	27	<i>telmisartan-hctz</i>	75	<i>temazepam 15 mg cap, 30 mg cap</i>	131
<b>STRIBILD</b>	61	<b>TEMIXYS</b>	61	<i>temsirolimus</i>	116
<i>subvenite</i>	31				
<i>sucralfate 1 gm tab</i>	100				
<i>sudogest 30 mg tab, 60 mg tab</i>	130				
<i>sudogest sinus/allergy 4-60 mg tab</i>	130				
<i>sulfacetamide sodium 10 % solution</i>	124				
<i>sulfacetamide sodium (acne)</i>	27				
<i>sulfacetamide-prednisolone</i>	124				
<i>sulfadiazine</i>	27				
<i>sulfamethoxazole-trimethoprim 200-40 mg/</i>					

TENIVAC .....	116	thiamine mononitrate 100 mg tab .....	91	tolterodine tartrate ....	102
<i>tenofovir disoproxil fumarate .....</i>	<i>61</i>	<i>thioridazine hcl .....</i>	<i>57</i>	<i>tolterodine tartrate er .....</i>	<i>102</i>
TEPMETKO .....	50	thiotepa .....	50	topiramate .....	31
<i>terazosin hcl .....</i>	<i>75</i>	<i>thiothixene .....</i>	<i>57</i>	<i>toposar 1 gm/50ml solution, 100 mg/5ml solution .....</i>	<i>50</i>
<i>terbinafine hcl .....</i>	<i>38</i>	THYMOGLOBULIN .....	116	<i>topotecan hcl 4 mg recon soln, 4 mg/4ml solution .....</i>	<i>50</i>
<i>terbinafine hcl 1 % cream .....</i>	<i>38</i>	<i>tiadylt er 120 mg cap er 24h, 180 mg cap er 24h, 240 mg cap er 24h, 300 mg cap er 24h, 360 mg cap er 24h .....</i>	<i>75</i>	<i>toremifene citrate .....</i>	<i>50</i>
<i>terbutaline sulfate 1 mg/ml solution, 2.5 mg tab, 5 mg tab .....</i>	<i>130</i>	<i>tiagabine hcl .....</i>	<i>31</i>	<i>torsemide .....</i>	<i>75</i>
<i>terconazole 0.4 % cream, 0.8 % cream, 80 mg suppos .....</i>	<i>38</i>	TIBSOVO .....	50	TOUJEO MAX	
TERIPARATIDE (RECOMBINANT) .....	118	TICE BCG .....	50	SOLOSTAR .....	67
<i>testosterone 1.62 % gel, 20.25 mg/act (1.62%) gel, 40.5 mg/2.5gm (1.62%) gel .....</i>	<i>110</i>	TICOVAC .....	116	TOUJEO SOLOSTAR .....	67
<i>testosterone 20.25 mg/ 1.25gm (1.62%) gel .....</i>	<i>110</i>	TIGECYCLINE .....	28	TOVIAZ .....	102
<i>testosterone 25 mg/2.5gm (1%) gel, 50 mg/5gm (1%) gel .....</i>	<i>110</i>	<i>timolol maleate 0.25 % gel f soln, 0.25 % solution, 0.5 % (daily) solution, 0.5 % gel f soln, 0.5 % solution .....</i>	<i>124</i>	TRACLEER 32 MG TAB	
<i>testosterone cypionate .....</i>	<i>110</i>	<i>timolol maleate 5 mg tab, 10 mg tab, 20 mg tab ....</i>	<i>75</i>	SOL .....	130
<i>testosterone enanthate .....</i>	<i>110</i>	<i>tis-u-sol .....</i>	<i>91</i>	TRADJENTA .....	67
<i>tetrabenazine 12.5 mg tab .....</i>	<i>78</i>	TIVICAY 10 MG TAB .....	61	<i>tramadol hcl 50 mg tab .....</i>	<i>21</i>
<i>tetrabenazine 25 mg tab .....</i>	<i>78</i>	TIVICAY 25 MG TAB, 50 MG TAB .....	61	<i>tramadol-acetaminophen .....</i>	<i>21</i>
<i>tetracycline hcl .....</i>	<i>28</i>	TIVICAY PD .....	61	<i>trandolapril .....</i>	<i>76</i>
TGT GLUCOSE 4-6 GM-MG CHEW TAB .....	67	<i>tizanidine hcl 2 mg tab, 4 mg tab .....</i>	<i>57</i>	<i>tranexamic acid 650 mg tab, 1000 mg/10ml solution .....</i>	<i>69</i>
<i>THALOMID 150 MG CAP, 200 MG CAP .....</i>	<i>50</i>	<i>tobramycin 0.3 % solution .....</i>	<i>124</i>	<i>tranylcyromine sulfate .....</i>	<i>35</i>
<i>THALOMID 50 MG CAP, 100 MG CAP .....</i>	<i>50</i>	<i>tobramycin 300 mg/5ml nebu soln .....</i>	<i>130</i>	TRAVASOL .....	91
<i>theophylline er .....</i>	<i>130</i>	<i>tobramycin sulfate 1.2 gm recon soln, 1.2 gm/30ml solution, 2 gm/50ml solution, 10 mg/ml solution, 80 mg/2ml solution .....</i>	<i>28</i>	<i>travoprost (bak free) ....</i>	<i>124</i>
<i>thiamine hcl 100 mg tab .....</i>	<i>91</i>	<i>tobramycin-dexamethasone .....</i>	<i>124</i>	<i>trazodone hcl .....</i>	<i>35</i>
		<i>tolcapone .....</i>	<i>53</i>	TREANDA .....	50
		<i>tolnaftate 1 % cream .....</i>	<i>38</i>	TRECATOR .....	40
				TRELEGY ELLIPTA .....	130
				TRELSTAR MIXJECT .....	112
				<i>tretinoin 0.01 % gel, 0.025 % cream, 0.025 % gel, 0.05 % cream, 0.1 % cream .....</i>	<i>82</i>
				<i>tretinoin 10 mg cap .....</i>	<i>50</i>
				TREXALL .....	116
				<i>tri femynor .....</i>	<i>110</i>



Kung may mga tanong kayo, pakitawagan ang Anthem Blue Cross Cal MediConnect Plan sa 1-833-370-7466 (TTY: 711), 24 na oras sa isang araw, 7 araw sa isang linggo. Libre ang tawag. Para sa higit pang impormasyon, bisitahin ang [duals.anthem.com](http://duals.anthem.com).

<i>tri-buffered aspirin 325 mg tab</i> .....	21
<i>tri-estarrylla</i> .....	110
<i>tri-linyah</i> .....	110
<i>tri-mili</i> .....	110
<i>tri-nymyo</i> .....	110
<i>tri-sprintec</i> .....	110
<i>tri-vylibra</i> .....	110
<i>triamcinolone acetonide 0.025 % cream, 0.025 % lotion, 0.025 % ointment, 0.1 % cream, 0.1 % lotion, 0.1 % ointment, 0.5 % cream, 0.5 % ointment</i> .....	82
<i>triamcinolone acetonide 0.1 % paste</i> .....	78
<i>triamcinolone acetonide 40 mg/ml suspension</i> .....	103
<i>triamterene-hctz</i> .....	76
<i>triderm</i> .....	82
<i>treintine hcl</i> .....	91
<i>trifluoperazine hcl</i> .....	57
<i>trifluridine</i> .....	61
<i>trihexyphenidyl hcl 0.4 mg/ml solution</i> .....	53
<i>trihexyphenidyl hcl 2 mg tab, 5 mg tab</i> .....	53
<i>trimethoprim</i> .....	28
<i>trimipramine maleate</i> ...	35
<i>TRINTELLIX</i> .....	35
<i>triple antibiotic 3.5-400-5000 ointment</i> .....	28
<i>TRIUMEQ</i> .....	61
<i>TRIUMEQ PD</i> .....	61
<i>trivora (28)</i> .....	110
<i>TRIZIVIR</i> .....	61
<i>TRODELVY</i> .....	120
<i>TROGARZO</i> .....	61
<i>TROPHAMINE</i> .....	91
<i>TRULICITY</i> .....	67
<i>TRUMENBA</i> .....	116
<i>TRUSELTIQ (100MG DAILY DOSE)</i> .....	50
<i>TRUSELTIQ (125MG DAILY DOSE)</i> .....	50
<i>TRUSELTIQ (50MG DAILY DOSE)</i> .....	50
<i>TRUSELTIQ (75MG DAILY DOSE)</i> .....	50
<i>TRUSTEX LUB/RIBBED/ STUDDED MISC</i> .....	120
<i>TRUSTEX LUB/SPERMICIDE EX ST MISC</i> .....	120
<i>TRUSTEX LUB/SPERMICIDE XL MISC</i> .....	120
<i>TRUSTEX LUBRICATED EX LARGE MISC</i> .....	120
<i>TRUSTEX LUBRICATED EXTRA ST MISC</i> .....	120
<i>TRUSTEX LUBRICATED MISC</i> .....	120
<i>TRUSTEX LUBRICATED/ SPERMICIDE MISC</i> .....	120
<i>TRUSTEX RIA LUB/ SPERMICIDE MISC</i> .....	121
<i>TRUSTEX RIA LUBRICATED MISC</i> .....	121
<i>TRUSTEX-NONOXYNOL-9/ RIB/STUD MISC</i> .....	121
<i>TRUVADA 100-150 MG TAB, 133-200 MG TAB, 167-250 MG TAB</i> .....	61
<i>TUKYSA</i> .....	50
<i>TUMS 500 MG CHEW TAB</i> .....	100
<i>TUMS EXTRA STRENGTH 750 750 MG CHEW TAB</i> .....	100
<i>TUMS ULTRA 1000 1000 MG CHEW TAB</i> .....	100
<i>TURALIO</i> .....	50
<i>TWINRIX</i> .....	116
<i>TYBOST</i> .....	61
<i>TYMLOS</i> .....	118
<i>TYPHIM VI</i> .....	116
<i>TYSABRI</i> .....	78
<b>U</b>	
<i>UBRELVY</i> .....	39
<i>UNILET COMFORTOUCH LANCET MISC</i> .....	121
<i>UNILET GP 28 ULTRA THIN MISC</i> .....	121
<i>UNILET MICRO-THIN 33G MISC</i> .....	121
<i>UNILET SUPER-THIN 30G MISC</i> .....	121
<i>UNILET ULTRA-THIN 28G MISC</i> .....	121
<i>unitriod</i> .....	111
<i>UP &amp; UP GLUCOSE 4-6 GM-MG CHEW TAB</i> .....	67
<i>UPTRAVI 200 &amp; 800 MCG TAB THPK</i> .....	130
<i>UPTRAVI 200 MCG TAB, 400 MCG TAB, 600 MCG TAB, 800 MCG TAB, 1000 MCG TAB, 1200 MCG TAB, 1400 MCG TAB, 1600 MCG TAB</i> .....	130
<i>ursodiol 250 mg tab, 300 mg cap, 500 mg tab</i> ....	100
<b>V</b>	
<i>valacyclovir hcl 1 gm tab</i> .....	61
<i>valacyclovir hcl 500 mg tab</i> .....	61
<i>VALCHLOR</i> .....	50
<i>valganciclovir hcl 450 mg tab</i> .....	61
<i>valproate sodium</i> .....	31
<i>valproic acid 250 mg cap, 250 mg/5ml solution</i> ....	31
<i>valsartan 40 mg tab, 80 mg tab, 160 mg tab, 320 mg tab</i> .....	76
<i>valsartan-hydrochlorothiazide</i> ....	76
<i>VALTOCO 10 MG DOSE</i> .....	31

VALTOCO 15 MG	VELCADE .....	50	vienna .....	110
DOSE .....	velivet .....	110	vigabatrin .....	31
VALTOCO 20 MG	VELPHORO .....	91	vigadroner .....	31
DOSE .....	VELTASSA .....	92	VIIBRYD .....	35
VALTOCO 5 MG DOSE .....	VEMLIDY .....	61	vilazodone hcl .....	35
VANCOMYCIN HCL 1 GM	VENCLEXTA 10 MG		VIMPAT 10 MG/ML	
RECON SOLN, 1.25 GM	TAB .....	50	SOLUTION .....	31
RECON SOLN, 1.5 GM	VENCLEXTA 100 MG		VIMPAT 150 MG TAB, 200	
RECON SOLN, 5 GM RECON	TAB .....	50	MG TAB .....	31
SOLN, 10 GM RECON SOLN,	VENCLEXTA 50 MG		VIMPAT 200 MG/20ML	
500 MG RECON SOLN, 500	TAB .....	50	SOLUTION .....	32
MG/100ML SOLUTION, 750	VENCLEXTA STARTING		VIMPAT 50 MG TAB, 100 MG	
MG RECON SOLN, 750 MG/	PACK .....	50	TAB .....	32
150ML SOLUTION, 1000	VENLAFAXINE BESYLATE		vinblastine sulfate .....	50
MG/200ML SOLUTION,	ER .....	35	vincasar pfs .....	51
1250 MG/250ML	venlafaxine hcl 25 mg tab,		vincristine sulfate .....	51
SOLUTION, 1500 MG/	37.5 mg tab, 50 mg tab,		vinorelbine tartrate .....	51
300ML SOLUTION, 1750	100 mg tab .....	35	viorele .....	110
MG/350ML SOLUTION,	venlafaxine hcl 75 mg		VIRACEPT 250 MG	
2000 MG/400ML	tab .....	35	TAB .....	61
SOLUTION .....	venlafaxine hcl er 37.5 mg		VIRACEPT 625 MG	
vancomycin hcl 125 mg	cap er 24h, 75 mg cap er		TAB .....	61
cap, 250 mg cap .....	24h, 75 mg tab er 24h, 150		VIREAD 150 MG TAB, 200	
VANCOMYCIN HCL IN	mg cap er 24h, 150 mg tab		MG TAB, 250 MG TAB ....	62
DEXTROSE .....	er 24h .....	35	VIREAD 40 MG/GM	
VANCOMYCIN HCL IN	venlafaxine hcl er 37.5 mg		POWDER .....	62
NACL .....	tab er 24h .....	35	virtussin a/c 100-10 mg/	
VANDAZOLE .....	VENTAVIS .....	130	5ml solution .....	130
VAQTA .....	VENTOLIN HFA .....	130	VITAMIN A PALMITATE 3 MG	
varenicline tartrate 0.5 mg	verapamil hcl 2.5 mg/ml		(10000 UT) TAB, 4.5 MG	
tab .....	solution, 40 mg tab, 80 mg		(15000 UT) TAB .....	92
varenicline tartrate 0.5 mg	tab, 120 mg tab .....	76	vitamin b 12 500 mcg	
x 11 & 1 mg x 42 tab	verapamil hcl er 100 mg		tab .....	92
thpk .....	cap er 24h, 120 mg cap er		vitamin b-1 50 mg tab, 250	
varenicline tartrate 1 mg	24h, 120 mg tab er, 180 mg		mg tab .....	92
tab .....	cap er 24h, 180 mg tab er,		vitamin b-12 100 mcg tab,	
VARIVAX .....	200 mg cap er 24h, 240 mg		250 mcg tab, 500 mcg sl	
VARIZIG .....	cap er 24h, 240 mg tab er,		tab, 500 mcg tab, 1000	
VASCEPA .....	300 mg cap er 24h .....	76	mcg tab, 3000 mcg/ml	
VCF VAGINAL	verapamil hcl er 360 mg		liquid .....	92
CONTRACEPTIVE 12.5 %	cap er 24h .....	76	vitamin b-2 25 mg tab, 50	
FOAM .....	VERSACLOZ .....	57	mg tab, 100 mg tab .....	92
VECAMYL .....	VERZENIO .....	50	vitamin b-6 50 mg tab, 100	
VECTIBIX .....	VICTOZA .....	67	mg tab .....	92



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VITAMIN B12 3000 MCG/ML LIQUID .....	92	VIZIMPRO .....	51	XCOPRI (250 MG DAILY DOSE) .....	32
vitamin b6 50 mg tab, 250 mg tab .....	92	volnea .....	110	XCOPRI (350 MG DAILY DOSE) .....	32
vitamin c 100 mg tab, 250 mg tab, 500 mg tab, 500 mg/5ml liquid, 1000 mg tab .....	92	VONJO .....	51	XERMELO .....	100
VITAMIN C (CALCIUM ASCORBATE) RECON SOLN .....	92	voriconazole 200 mg tab .....	38	XGEVA .....	119
vitamin c-rose hips 500 mg tab, 1000 mg tab .....	92	voriconazole 40 mg/ml recon susp .....	38	XIFAXAN 550 MG TAB ....	28
vitamin d 10 mcg/ml liquid, 25 mcg (1000 ut) tab, 50 mcg (2000 ut) cap, 50 mcg (2000 ut) tab .....	118	voriconazole 50 mg tab, 200 mg recon soln .....	38	XIGDUO XR 2.5-1000 MG TAB ER 24H, 5-1000 MG TAB ER 24H .....	67
vitamin d high potency 25 mcg (1000 ut) cap .....	118	VOSEVI .....	62	XIGDUO XR 5-500 MG TAB ER 24H, 10-1000 MG TAB ER 24H, 10-500 MG TAB ER 24H .....	67
vitamin d (cholecalciferol) 10 mcg (400 unit) tab, 25 mcg (1000 ut) cap, 25 mcg (1000 ut) tab .....	118	VOTRIENT .....	51	XIIDRA .....	124
vitamin d (ergocalciferol) 1.25 mg (50000 ut) cap .....	118	VPRIV .....	101	XOFLUZA (40 MG DOSE) .....	62
VITAMIN D2 10 MCG (400 UNIT) TAB .....	118	VRAYLAR 1.5 & 3 MG CAP THPK .....	57	XOFLUZA (80 MG DOSE) .....	62
VITAMIN D3 1.25 MG (50000 UT) CAP, 10 MCG (400 UNIT) TAB, 25 MCG (1000 UT) CAP, 25 MCG (1000 UT) TAB, 50 MCG (2000 UT) CAP, 50 MCG (2000 UT) TAB, 75 MCG (3000 UT) TAB, 125 MCG (5000 UT) CAP, 125 MCG (5000 UT) TAB, 250 MCG (10000 UT) CAP ...	119	VRAYLAR 1.5 MG CAP, 3 MG CAP, 4.5 MG CAP, 6 MG CAP .....	57	XOLAIR 150 MG RECON SOLN, 150 MG/ML SOLN PRSYR .....	117
vitamin e 450 mg (1000 ut) cap .....	92	VYXEOS .....	51	XOLAIR 75 MG/0.5ML SOLN PRSYR .....	117
VITRAKVI 100 MG CAP ....	51	VYZULTA .....	124	XOSPATA .....	51
VITRAKVI 20 MG/ML SOLUTION .....	51	<b>W</b>		XPOVIO (100 MG ONCE WEEKLY) 20 MG TAB THPK .....	51
VITRAKVI 25 MG CAP ....	51	warfarin sodium .....	69	XPOVIO (100 MG ONCE WEEKLY) 50 MG TAB THPK .....	51
		WELIREG .....	51	XPOVIO (40 MG ONCE WEEKLY) 20 MG TAB THPK .....	51
		wera .....	110	XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK .....	51
		wixela inhub .....	130	XPOVIO (40 MG TWICE WEEKLY) 20 MG TAB THPK .....	51
		<b>X</b>		XPOVIO (40 MG TWICE WEEKLY) 40 MG TAB THPK .....	51
		XALKORI .....	51	XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK .....	51
		XARELTO 10 MG TAB, 20 MG TAB .....	69	XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK .....	51
		XARELTO 2.5 MG TAB, 15 MG TAB .....	69	XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK .....	51
		XARELTO STARTER PACK .....	69	XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK .....	51
		XATMEP .....	116	XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK .....	51
		XCOPRI 14 X 12.5 MG & 14 X 25 MG TAB THPK, 14 X 150 MG & 14 X200 MG TAB THPK, 14 X 50 MG & 14 X100 MG TAB THPK .....	32	XPOVIO (40 MG TWICE WEEKLY) 20 MG TAB THPK .....	51
		XCOPRI 150 MG TAB, 200 MG TAB .....	32	XPOVIO (40 MG TWICE WEEKLY) 40 MG TAB THPK .....	51
		XCOPRI 50 MG TAB, 100 MG TAB .....	32	XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK .....	51



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XPOVIO (60 MG ONCE WEEKLY) 20 MG TAB THPK .....	51
XPOVIO (60 MG ONCE WEEKLY) 60 MG TAB THPK .....	51
XPOVIO (60 MG TWICE WEEKLY) .....	51
XPOVIO (80 MG ONCE WEEKLY) 20 MG TAB THPK .....	51
XPOVIO (80 MG ONCE WEEKLY) 40 MG TAB THPK .....	51
XPOVIO (80 MG TWICE WEEKLY) .....	51
XTANDI 40 MG CAP .....	51
XTANDI 40 MG TAB .....	51
XTANDI 80 MG TAB .....	52
XYREM .....	131
Y	
YERVOY .....	52
YF-VAX .....	117
YONDELIS .....	52
YONSA .....	52

Z	
zafirlukast .....	130
zaleplon 10 mg cap .....	131
zaleplon 5 mg cap .....	131
ZALTRAP .....	52
ZANOSAR .....	52
ZARXIO .....	69
ZEJULA .....	52
ZELBORAF .....	52
zenatane .....	82
ZENPEP .....	101
zenzedi 10 mg tab .....	78
zenzedi 5 mg tab .....	78
ZEPZELCA .....	52
zidovudine 100 mg cap .....	62
zidovudine 300 mg tab .....	62
zidovudine 50 mg/5ml syrup .....	62
ziprasidone hcl 20 mg cap .....	57
ziprasidone hcl 40 mg cap .....	57

ziprasidone hcl 60 mg cap, 80 mg cap .....	57
ziprasidone mesylate ....	57
ZIRGAN .....	62
zoledronic acid 4 mg/ 100ml solution, 4 mg/5ml conc .....	119
ZOLINZA .....	52
zolmitriptan 2.5 mg tab, 2.5 mg tab disp, 5 mg tab, 5 mg tab disp .....	39
zolpidem tartrate 5 mg tab, 10 mg tab .....	131
zonisamide .....	32
ZORTRESS 1 MG TAB ...	117
zovia 1/35 (28) .....	110
zovia 1/35e (28) .....	110
ZTALMY .....	32
ZULRESSO .....	35
zumandimine .....	111
ZYDELIG .....	52
ZYKADIA .....	52
ZYNLONTA .....	52
ZYPREXA RELPREW .....	57
ZYTIGA 500 MG TAB .....	52



## **ABISO SA HINDI PANDIDISKRIMINA**

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Labag sa batas ang pandidiskrimina. Sumusunod ang Anthem Blue Cross Cal MediConnect Plan sa mga Pang-estado at Federal na batas sa karapatang sibil. Ang Anthem Blue Cross Cal MediConnect Plan ay hindi labag sa batas na nandidiskrimina, nagsasantabi ng mga tao, o kaya ay nagtatrato sa kanila sa ibang paraan dahil sa sex, lahi, kulay, relihiyon, ninuno, bansang pinagmulan, kinikilalang etnikong grupo, edad, kapansanan sa isip, kapansanang pisikal, karamdaman, genetic na impormasyon, marital status, kasarian, kinikilalang kasarian, o sekswal na oryentasyon.

Nagbibigay ang Anthem Blue Cross Cal MediConnect Plan ng:

- Mga libreng tulong at serbisyo sa mga taong may kapansanan para tulungan silang mas makausap nang maayos, gaya ng:
  - ✓ Mga kwalipikadong interpreter ng sign language
  - ✓ Nakasulat na impormasyon sa ibang format (malaking print, audio, mga accessible na electronic format, at iba pang format)
- Mga libreng serbisyo sa wika para sa mga taong hindi Ingles ang pangunahing wika, tulad ng:
  - ✓ Mga kwalipikadong interpreter
  - ✓ Impormasyong nakasulat sa iba pang wika

Kung kailangan ninyo ng mga serbisyo ng ito, makipag-ugnayan sa Anthem Blue Cross Cal MediConnect Plan mula 8 a.m. hanggang 8 p.m. sa pamamagitan ng pagtawag sa 1-855-817-5785. Kung hindi kayo nakaririnig o nakapagsasalita nang maayos, pakitawagan ang TTY: 711. Kung hihilingin, puwedeng gawing available ang dokumentong ito sa braille, malaking print, audio CD, data CD, o electronic na anyo. Para makakuha ng kopya sa isa sa mga alternatibong format na ito, mangyaring tumawag o sumulat sa:

Anthem Blue Cross Cal MediConnect Plan  
MMP Member Services  
12900 Park Plaza Drive, Suite 150 Mailstop: 6150 Cerritos, CA 90703-9329  
1-855-817-5785 (TTY: 711)  
California Relay 711

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## **PAANO MAGSAMPA NG ISANG KARAINGAN**

Kung naniniwala kayo na ang Anthem Blue Cross Cal MediConnect Plan ay nabigong ipagkaloob ang mga serbisyon ito o kaya ay labag sa batas na nandiskrimina sa ibang paraan dahil sa sex, lahi, kulay, relihiyon, ninuno, bansang pinagmulan, kinikilalang etnikong grupo, edad, kapansanan sa isip, kapansanang pisikal, karamdaman, genetic na impormasyon, marital status, kasarian, kinikilalang kasarian, o sekswal na oryentasyon, maaari kayong maghain ng karaingan sa Anthem Blue Cross Cal MediConnect Plan's Compliance Coordinator. Puwede kayong maghain ng karaingan sa pamamagitan ng pagtawag, pagsulat, o sa electronic na paraan:

- Sa pamamagitan ng telepono: Makipag-ugnayan sa Compliance Coordinator mula 8 a.m. hanggang 8 p.m. sa pamamagitan ng pagtawag sa 1-855-817-5785. O, kung hindi kayo nakaririnig o nakapagsasalita nang maayos, pakitawagan ang 711.
  - Sa pamamagitan ng pagsulat: Punan ang form para sa reklamo o gumawa ng sulat at ipadala ito sa:  
Anthem Blue Cross Cal MediConnect  
Complaints, Appeals & Grievances:  
Mailstop: OH0205-A537  
4361 Irwin Simpson Rd.  
Mason, OH 45040
  - Sa electronic na paraan: Magpadala ng email sa [info@caremore.com](mailto:info@caremore.com).
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## **OFFICE OF CIVIL RIGHTS – CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES**

Puwede rin kayong maghain ng reklamo kaugnay ng mga karapatang sibil sa Departamento ng Mga Serbisyo sa Pangangalagang Pangkalusugan ng California, Opisina ng Karapatang Sibil (Department of Health Care Services, Office of Civil Rights) sa pamamagitan ng pagtawag, pagsulat, o sa electronic na paraan:

- Sa pamamagitan ng telepono: Tumawag sa **1-916-440-7370**. Kung hindi kayo makapagsalita o makarinig nang maayos, pakitawagan ang 711 (Telecommunications Relay Service).
  - Sa pamamagitan ng pagsulat: Punan ang form para sa reklamo o magpadala ng sulat sa:  
**Deputy Director, Office of Civil Rights**  
**Department of Health Care Services**  
**Office of Civil Rights**  
**P.O. Box 997413, MS 0009**  
**Sacramento, CA 95899-7413**  
Makukuha ang mga form ng reklamo sa  
[http://www.dhcs.ca.gov/Pages/Language\\_Access.aspx](http://www.dhcs.ca.gov/Pages/Language_Access.aspx).
  - Sa electronic na paraan: Magpadala ng email sa [CivilRights@dhcs.ca.gov](mailto:CivilRights@dhcs.ca.gov).
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## **OFFICE OF CIVIL RIGHTS – U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES**

Kung naniniwala kayong nadiskrimina kayo dahil sa lahi, kulay, pinagmulang bansa, edad, kapansanan o sex, puwede rin kayong maghain ng karapatang sibil na reklamo sa Departamento ng mga Serbisyon Pangkalusugan at Pantao, Opisina ng Karapatang Sibil ng U.S. (U.S. Department of Health and Human Services, Office for Civil Rights) sa pamamagitan ng pagsulat, pagtawag, o sa electronic na paraan:

- Sa pamamagitan ng telepono: Tumawag sa **1-800-368-1019**. Kung hindi kayo nakaririnig o nakapagsasalita nang maayos, pakitawagan ang **TTY/TDD 1-800-537-7697**.
- Sa pamamagitan ng pagsulat: Punan ang form para sa reklamo o magpadala ng sulat sa:  
**U.S. Department of Health and Human Services**  
**200 Independence Avenue, SW**  
**Room 509F, HHH Building**  
**Washington, D.C. 20201**  
Available ang mga form ng reklamo sa <http://www.hhs.gov/ocr/office/file/index.html>.
- Sa electronic na paraan: Bisitahin ang Portal para sa Pagrereklogo sa Opisina ng Karapatang Sibil (Office for Civil Rights Complaint Portal) sa  
<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

## TAGLINES

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### **English Tagline**

ATTENTION: If you need help in your language call 1-855-817-5785 (TTY: 711). Aids and services for people with disabilities, like documents in braille and large print, are also available. Call 1-855-817-5785 (TTY: 711). These services are free of charge.

### **الشعار بالعربية (Arabic)**

يرجى الاتصال: إذا احتجت إلى المساعدة بلغتك، فاتصل ب (711) (TTY: 1-855-817-5785). توفر أيضًا المساعدات والخدمات للأشخاص ذوي الإعاقة، مثل المستندات المكتوبة بطريقة برييل والخط الكبير. تصل ب (711) (TTY: 1-855-817-5785). هذه الخدمات مجانية.

### **Հայերեն կարգախոս (Armenian)**

ՈՒՇԱԴՐՈՒԹՅՈՒՆ՝ Եթե ձեր լեզվով օգնության կարիք ունեք, զանգահարեք 1-855-817-5785 (TTY: 711): Նաև հասանելի են օգնություն և ծառայություններ համանդամություն ունեցող անձանց, օրինակ՝ փաստարդեր բրեյլով և խուզր տպագրությամբ: Զանգահարեք 1-855-817-5785 (TTY: 711): Այս ծառայություններն անվճար են:

### **ខ្មែរ (Cambodian)**

ប្រចាំប្រចាំថ្ងៃ: ប្រសិទ្ធភាពអភិវឌ្ឍន៍ការង់ដូចជាសារពល់អ្នក  
ស្ថាមាត្រាក្នុងសញ្ញាណទៅលើ 1-855-817-5785 (TTY: 711)។ ជំនួយ គិតសេវាអ្នកស្រាប់ជនពីការ  
ខ្សោចដោយការសារជាមាត្រាស្ថាប គិតនានាលោះ: ពុម្ពជាមាត្រាខំព័ត៌មានដែល ហៅក្នុងសញ្ញាណទៅលើ  
1-855-817-5785 (TTY: 711)។ សេវាដែលនេះគឺត្រូវការគោលដៅ។

### **中文標語 (Chinese)**

請注意：如需獲得您的母語協助，請致電 1-855-817-5785 (TTY: 711)。還提供針對殘障人士的協助和服務，例如盲文和大字型檔案。請致電 1-855-817-5785 (TTY: 711)。這些服務均為免費。

### **اطلاعیه فارسی (Farsi)**

توجه: اگر میخواهید به زبان خود کمک دریافت کنید، با (711) (TTY: 1-855-817-5785) تماس بگیرید. کمکها و خدمات مخصوص افراد دارای معلولیت، مانند نسخهای خط بریل و چاپ با حروف بزرگ، نیز موجود است. با (711) (TTY: 1-855-817-5785) تماس بگیرید. این خدمات رایگان ارائه می‌شوند.

### **हिन्दी टैगलाइन (Hindi)**

ध्यान दें: अगर आपको अपनी भाषा में मदद चाहिए तो 1-855-817-5785 (TTY: 711) पर कॉल करें। वकिलांग लोगों के ललाए सायिता और सेपिएं, जैसे ब्रेल और बड़े वरांट में दस्ताओंजि, भी उपलब्ध हैं। 1-855-817-5785 (TTY: 711) पर कॉल करें। ये सेपिएं नन: शुल्क हैं।

### **Qhov Tseem Ceeb (Hmong)**

NCO NTSOOV: Yog koj xav tau kev pab los ntawm cov neeg hais tau koj yam lus, hu 1-855-817-5785 (TTY: 711). Peb los yeej muaj cov khoom thiab kev pab zoo li cov ntaub ntawv siv tes plhw (braille) thiab cov ntaub ntawv uas muab luam kom pom cov tsiaj loj rau cov tib neeg muaj kev xiam oob qhab siv. Hu 1-855-817-5785 (TTY: 711). Cov kev pab ntawm no yeej yog muaj rau neeg siv dawb xwb.

## 日本語 (Japanese)

注意：日本語での対応が必要な場合は、1-855-817-5785 (TTY: 711)へお電話ください。点字の資料や文字の拡大表示など、障がいをお持ちの方のための補助やサービスも用意しています。1-855-817-5785 (TTY: 711)へお電話ください。これらのサービスは無料で提供しています。

## 한국어 태그라인 (Korean)

유의사항: 귀하의 언어로 도움을 받고 싶으시면 1-855-817-5785 (TTY: 711)번으로 문의하십시오. 점자나 큰 활자로 된 문서와 같이 장애가 있는 분들을 위한 도움과 서비스도 이용 가능합니다. 1-855-817-5785 (TTY: 711)번으로 문의하십시오. 이러한 서비스는 무료로 제공됩니다.

## ລາວ ຕົນວາວ (Laotian)

ໝາຍເຫດ: ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອດ້ານພາສາຂອງທ່ານ ກະວຸນໄໃຫ  
1-855-817-5785 (TTY: 711). ການຊ່ວຍເຫຼືອ ແລະ ການບໍວິການຄົນຜົການ ໄດ້  
ຕົວໜັງສືບູນ ແລະ ການຜົມຕົວໜັງຮີໃຫຍ່ ດັ່ງນີ້ແລ້ວ. ໂທ 1-855-817-5785 (TTY: 711).  
ການບໍວິການເຫຼົ່ານີ້ແມ່ນບໍ່ແຈ້ຍຄ່າ.

## Mienh nyei Tagline (Mien)

JANGX LONGX OC: Beiv taux meih qiex zuqc longc mienh tengx faan benx meih nyei waac nor korh waac lorx oc 1-855-817-5785 (TTY: 711). Maaih jaa-sic tengx nzie aengx caux nzie weih bun wuaaic fangx mienh benx sou-gorn beiv taux benx nzangc-pokc aengx caux aamz benx domh zeiv bun longc. Korh waac lorx 1-855-817-5785 (TTY: 711). Naaiv deix zuangx gong se wang-henh tengx hnangv mv zuqc cuotv nyaanh oc.

## ਪੰਜਾਬੀ ਟੈਗਲਾਈਨ (Punjabi)

ਪਿਆਨ ਦਿਓ: ਜੇ ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਮਦਦ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਾਲ ਕਰੋ 1-855-817-5785 (TTY: 711)। ਅਪਾਹਜ ਲੋਕਾਂ ਲਈ ਸਹਾਇਤਾ ਅਤੇ ਸੇਵਾਂ, ਧਜ਼ੇ ਧਕ ਬ੍ਰੇਲ ਅਤੇ ਮੌਤੀ ਛਪਾਈ ਧ ਚਿੰਨ ਸਿਤਾਂ ਜੀ ਉਲਪਬੰਹਿਨਾ ਕਾਲ ਕਰੋ 1-855-817-5785 (TTY: 711)। ਇਹ ਸੇਵਾਂ ਮੁਫ਼ਤ ਹਨ।

## Текст на русском (Russian)

ВНИМАНИЕ! Если вам нужна помощь на вашем родном языке, звоните по номеру 1-855-817-5785 (TTY: 711). Также предоставляются средства и услуги для людей с ограниченными возможностями, например документы, набранные крупным шрифтом или шрифтом Брайля. Звоните по номеру 1-855-817-5785 (TTY: 711). Такие услуги предоставляются бесплатно.

## Mensaje en español (Spanish)

ATENCIÓN: si necesita ayuda en su idioma, llame al 1-855-817-5785 (TTY: 711) También ofrecemos asistencia y servicios para personas con discapacidades, como documentos en braille y con letras grandes. Llame al 1-855-817-5785 (TTY: 711). Estos servicios son gratuitos.

### **Tagline sa Tagalog (Tagalog)**

PAUNAWA: Kung kailangan mo ng tulong sa iyong wika, tumawag sa 1-855-817-5785 (TTY: 711). Mayroon ding mga tulong at serbisyo para sa mga taong may kapansanan, tulad ng mga dokumento na nasa braille at malaking print. Tumawag sa 1-855-817-5785 (TTY: 711). Libre ang mga serbisyong ito.

### **แท็กไลน์ภาษาไทย (Thai)**

โปรดทราบ: หากคุณต้องการความช่วยเหลือเป็นภาษาของคุณ กรุณาโทรคัพท์ไปที่หมายเลข 1-855-817-5785 (TTY: 711) นอกจากนี้เรายังให้ความช่วยเหลือและบริการต่างๆ สำหรับบุคคลที่มีความพิการ เช่น เอกสารต่างๆ ที่เป็นอักษรเบรลล์และสิ่งพิมพ์ที่มีขนาดใหญ่ กรุณาโทรคัพท์ไปที่หมายเลข 1-855-817-5785 (TTY: 711) บริการเหล่านี้ไม่มีค่าใช้จ่าย

### **Примітка українською (Ukrainian)**

УВАГА! Якщо вам потрібна допомога вашою рідною мовою, телефонуйте за номером 1-855-817-5785 (TTY: 711). Люди з обмеженими можливостями також можуть скористатися допоміжними засобами та послугами, наприклад, отримати документи, надруковані шрифтом Брайля та великим шрифтом. Телефонуйте за номером 1-855-817-5785 (TTY: 711). Ці послуги безкоштовні.

### **Tagline Tiếng Việt (Vietnamese)**

CHÚ Ý: Nếu quý vị cần được trợ giúp bằng ngôn ngữ của mình, vui lòng gọi số 1-855-817-5785 (TTY: 711). Chúng tôi cũng hỗ trợ và cung cấp các dịch vụ dành cho người khuyết tật như tài liệu bằng chữ nổi Braille và bản in khổ lớn. Vui lòng gọi số 1-855-817-5785 (TTY: 711). Các dịch vụ này đều miễn phí.



**Para sa mas kamakailang impormasyon o  
iba pang tanong, makipag-ugnayan sa amin  
sa**

**1-833-370-7466 (TTY: 711)**

**24 na oras sa isang araw, 7 araw sa isang linggo  
o bisitahin ang [duals.anthem.com](http://duals.anthem.com).**



Na-update ang pormularyong ito noong 11/2/2022.

Ang Anthem Blue Cross Cal MediConnect Plan (Medicare-Medicaid Plan) ay isang planong pangkalusugang nakikipagkontrata sa Medicare at Medi-Cal upang ibigay ang mga benepisyo ng parehong programa sa mga nagpapatala.

Ang Anthem Blue Cross ay ang trade name para sa Blue Cross of California. Ang Anthem Blue Cross at Blue Cross of California Partnership Plan, Inc. ay mga hiwalay na licensee ng Blue Cross Association.

Ang ANTHEM ay rehistradong trademark ng Anthem Insurance Companies, Inc.

H6229\_22\_3000073\_T\_TA\_0012 CMS approved 08/27/2021

ID ng Pormularyo: CA\_MMP\_22191\_v19\_2212\_1 Bersyon: v19

Na-isyu noong 12/1/2022

